

EXHIBIT A



**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
Philadelphia District Office**

801 Market Street, Suite 1000
Philadelphia, PA 19107-3126
Free: (833) 827-2920
TTY: (215) 440-2606
FAX: (215) 440-2610
Website: www.eeoc.gov

06/02/2023

VIA: rfe@rfelawfirm.com

Robert Englert

RFE LAW FIRM, LLC

105 Rutgers Avenue #249

Swarthmore, PA 19081

Re: FOIA No.: 530-2023-008654

Charge No.: 17F-2022-61071

Diblasi v. Guthrie Healthcare System

Dear Mr. Englert:

Your Freedom of Information Act (FOIA) request, received on 05/04/2023, is processed. Our search began on 05/04/2023. All agency records in creation as of 05/04/2023 are within the scope of EEOC's search for responsive records. The paragraph(s) checked below apply.

- Your request is granted.
- Your request is denied pursuant to the subsections of the FOIA indicated at the end of this letter. An attachment to this letter explains the use of these exemptions in more detail.
- Your request is procedurally denied as [] it does not reasonably describe the records you wish disclosed, or [] no records fitting the description of the records you seek disclosed exist or could be located after a thorough search, or [] the responsive records are already publicly available. See the Comments page for further explanation.
- Your request is granted in part and denied in part. Portions not released are withheld pursuant to the subsections of the FOIA indicated at the end of this letter. An attachment to this letter explains the use of these exemptions in more detail.
- Your request is closed for administrative reasons. An attachment to this letter further explains this closure.
- A fee of \$ 0 is charged. Charges for manual search and review services are assessed according to the personnel category of the person conducting the search a. Fees for search services range from \$5.00 per quarter hour to \$20.00 per quarter hour. Direct cost is charged for computer search and in certain other circumstances. Photocopying is .15 per page. 29 C.F.R. §1610.15. The attached Comments page further explains the direct costs assessed. The fee(s) charged is computed as follows:
 - Commercial use request: [] pages of photocopying; [] quarter hour(s) of [] review time; and [] quarter hour(s) of [] search time. Direct costs are billed in the amount of [] for [];
 - Educational or noncommercial scientific institution or a representative of the news media request: [] pages of photocopying. The first 100 pages are provided free of charge; and
 - All other requests: [] pages of photocopying and [] quarter hour(s) of search time.

EEOC0001

FOIA No.: 530-2023-008654

Direct costs are billed in the amount of [] for []. The first 100 pages and the first two hours of search time are provided free of charge.

Please submit payment of \$ 0 by either:

- (1) Credit card at pay.gov. Visa, MasterCard, American Express and Discover credit cards are accepted. Debit cards bearing the Visa or MasterCard logo are also accepted. We will finish processing your request after EEOC receives a copy of your pay.gov credit or debit card receipt or
- (2) Check, payable to the United States Treasurer, to the address above.

[X] The disclosed records are enclosed. No fee is charged because the cost of collecting and processing the chargeable fee equals or exceeds the amount of the fee. 29 C.F.R. § 1610.15(d).

[] The disclosed records are enclosed. Photocopying and search fees have been waived pursuant to 29 C.F.R. § 1610.14.

[X] I trust that the furnished information fully satisfies your request. If you need any further assistance or would like to discuss any aspect of your request, please do not hesitate to contact the FOIA Professional who processed your request or our FOIA Public Liaison (see contact information in above letterhead or under signature line).

[X] You may contact the EEOC FOIA Public Liaison Michael L. Heise for further assistance or to discuss any aspect of your request. In addition, you may contact the Office of Government Information Services (OGIS) to inquire about the FOIA mediation services they offer.

The contact information for OGIS is as follows: Office of Government Information Services, National Archives and Records Administration, 8601 Adelphi Road-OGIS, College Park, Maryland 20740-6001, email at ogis@nara.gov; telephone at (202) 741-5770; toll free 1-877-684-6448; or facsimile at (202) 741-5769.

The contact information for the FOIA Public Liaison is as follows: Michael L. Heise, EEOC FOIA Public Liaison, Office of Legal Counsel, FOIA Division, Equal Employment Opportunity Commission, 131 M. Street, N.E., Fifth Floor, Washington, D.C. 20507, email to FOIA@eeoc.gov, telephone at (202) 921-2542; or fax at (202) 653-6034.

[X] If you are not satisfied with the response to this request, you may administratively appeal in writing. Your appeal must be postmarked or electronically transmitted in 90 days from receipt of this letter to the Office of Legal Counsel, FOIA Division, Equal Employment Opportunity Commission, 131 M Street, NE, 5NW02E, Washington, D.C. 20507, email to FOIA@eeoc.gov; online at <https://eeoc.arkcase.com/foia/portal/login>, or fax at (202) 653-6034. Your appeal will be governed by 29 C.F.R. § 1610.11.

[] See the attached Comments page for further information.

Sincerely,

Bridget Lange for

Jamie R. Williamson
District Director
philfoia@eeoc.gov

EOC0002

FOIA No.: 530-2023-008654

Applicable Sections of the Freedom of Information Act, 5 U.S.C. § 552(b):

Exemption(s) Used:

<input type="checkbox"/> (b)(3)(A)(i)	<input checked="" type="checkbox"/> (b)(6)
<input type="checkbox"/> § 706(b)	<input checked="" type="checkbox"/> (b)(7)(A)
<input type="checkbox"/> § 709(e)	<input checked="" type="checkbox"/> (b)(7)(C)
<input type="checkbox"/> § 107 of the ADA	<input type="checkbox"/> (b)(7)(D)
<input type="checkbox"/> § 207 of the GINA	<input type="checkbox"/> (b)(7)(E)
<input type="checkbox"/> (b)(4)	<input type="checkbox"/> (b)(7)(F)
<input checked="" type="checkbox"/> (b)(5)	

(b)(5)

Exemption (b)(5) to the Freedom of Information Act (FOIA), 5 U.S.C. § 552(b)(5) (2016), as amended by the FOIA Improvement Act of 2016, Pub. L. No. 114-185, 130 Stat. 538, permits withholding documents that reflect the analyses and recommendations of EEOC personnel generated for the purpose of advising the agency of possible action. This exemption protects the agency's deliberative process and allows nondisclosure of "inter-agency or intra-agency memorandums or letters which would not be available to a party other than an agency in litigation with the agency." 5 U.S.C. § 552(b)(5). The exemption covers internal communications that are deliberative in nature. *National Labor Relations Board v. Sears, Roebuck & Co.*, 421 U.S. 132 (1975); *Hinckley v. United States*, 140 F.3d 277 (D.C. Cir. 1998); *Mace v. EEOC*, 37 F. Supp. 2d 1144 (E.D. Mo. 1999). The purpose of the deliberative process privilege is to "allow agencies freely to explore alternative avenues of action and to engage in internal debates without fear of public scrutiny." *Missouri ex. rel. Shorr v. United States Corps of Eng'rs.*, 147 F.3d 708, 710 (8th Cir. 1998). Disclosure of preliminary assessments and opinions would create a chilling effect on the Commission staff's ability to freely and openly deliberate and discuss ideas, strategies, and recommendations, thereby impairing the Commission's ability to effectively and efficiently enforce applicable federal EEO laws by investigating charges and complaints, litigating and adjudicating cases, promulgating regulatory and sub-regulatory guidance, conducting outreach and education activities, and other related activities. Records may be withheld under this exemption if they were prepared prior to an agency's decision, *Wolfe v. Dep't of Health and Human Services*, 839 F.2d 768, 775, 776 (D.C. Cir. 1988) (en banc) and for the purpose of assisting the agency decision maker. *First Eastern Corp. v. Mainwaring*, 21 F.3d 465, 468 (D.C. Cir. 1994). See also, *Greyson v. McKenna & Cuneo and EEOC*, 879 F. Supp. 1065, 1068, 1069 (D. Colo. 1995). Records may also be withheld to the extent they reflect "selective facts" compiled by the agency to assist in the decision-making process. *A. Michael's Piano, Inc. v. Federal Trade Commission*, 18 F.3d 138 (2d Cir. 1994). An agency may also withhold records to the extent that they contain factual information already obtained by a requester through prior disclosure. See *Mapother, Nevas, et al. v. Dep't of Justice*, 3 F.3d 1533 (D.C. Cir. 1993). DOCUMENTS WITHHELD PURSUANT TO EXEMPTION (b)(5) TO THE FOIA:

FOIA No.: 530-2023-008654

Number of Page(s)	Document Name Redaction/Exemption	Document Date	Page Number
2	Activity Log Processing Category Information Redacted Ex. (b)(5)	03/03/2023 07/26/2023	95, 105

(b)(6)

Exemption (b)(6) to the Freedom of Information Act (FOIA), 5 U.S.C. § 552(b)(6) (2016), as amended by the FOIA Improvement Act of 2016, Pub. L. No. 114-185, 130 Stat. 538, permits withholding of information about individuals in "personnel and medical files and similar files" if its disclosure "would constitute a clearly unwarranted invasion of personal privacy." In addition to personnel records and medical files, the term "similar files" encompasses all information that "applies to a particular individual." *Dep't of State v. Washington Post Co.*, 456 U.S. 595, 599-603 (1982). This exemption requires that the privacy interests of the individual be balanced against the public interest in disclosure. *Dep't of the Air Force v. Rose*, 425 U.S. 352, 372 (1976). In examining whether there is a "public interest" in disclosure of certain information, the "public interest" must truly be in the interest of the overall public. In *United States Dep't of Justice v. Reporters Comm. for Freedom of the Press*, 489 U.S. 749, 773 (1989), the Supreme Court explained that only "[o]fficial information that sheds light on an agency's performance of its statutory duties" merits disclosure under FOIA, and noted that "disclosure of information about private citizens that is accumulated in various governmental files" would "reveal little or nothing about an agency's own conduct."
 \n\nPersonal details pertaining to an individual are generally protected under this exemption. See, e.g., *DOD v. FLRA*, 510 U.S. 487, 500-502 (1994) (finding privacy interest in federal employees' home addresses even though they often are publicly available through sources such as telephone directories and voter registration lists); *Pons v. United States Customs Service*, No. 93-2094, 1998 U.S. Dist. LEXIS 6084 at **13-14 (D.D.C. April 27, 1998) (protecting identities of lower and mid-level agency employees who worked on asset forfeiture documents); *Barwick v. Cisneros*, 941 F. Supp. 1015 (D. Kan. 1996) (finding personal information such as home addresses and telephone numbers, social security numbers, dates of birth, insurance and retirement information, reasons for leaving prior employment, and performance appraisals protectable under Exemption Six). See also, *Rothman v. USDA*, 1996 Lexis 22716 (C.D. Cal. June 17, 1996) (disclosure of information in the applications of persons who failed to get a job may embarrass or harm them).

Number of Page(s)	Document Name Redaction/Exemption	Document Date	Page Number
1	Various Documents Personal Identifying Information Ex. (b)(6)	07/26/2022	1

(b)(7)(A)

Exemption (b)(7)(A) to the Freedom of Information Act (FOIA), 5 U.S.C. § 552(b)(7)(A)

FOIA No.: 530-2023-008654

(2016), as amended by the FOIA Improvement Act of 2016, Pub. L. No. 114-185, 130 Stat. 538, authorizes the Commission to withhold:\n\nrecords or information compiled for law enforcement purposes, but only to the extent that the production of such law enforcement records or information (A) could reasonably be expected to interfere with enforcement proceedings\n\nThe seventh exemption applies to civil and criminal investigations conducted by regulatory agencies. General Electric Co. v. United States EPA, 18 F.Supp.2d 138, 143 (D. Mass. 1998). Premature disclosure of records compiled during an agency investigation will allow requester to know the possible nature, scope, direction, and limits of the investigation. J.P. Stevens & Co. v. Perry, 710 F. 2d 136, 143 (4th Cir. 1983); Hambarian v. Commissioner of IRS, No. CV 99-9000, 2000 WL 637347 (C.D. Cal. Feb. 16, 2000). Release of statements by witnesses creates the potential for witness intimidation that could deter their cooperation. National Labor Relations Board v. Robbins Tire and Rubber Co., 437 U.S. 214, 239 (1978); Manna v. United States Dep't of Justice, 51 F.3d 1158, 1164 (3d Cir. 1995). Exemption 7(A) applies "until . . . all reasonably foreseeable administrative and judicial proceedings are concluded" Service Employees Int. Union, AFL-CIO v. GSA, No. 97 Civ. 8509, 1998 WL 726000 (S.D.N.Y. Oct. 15, 1998); Southern Baptist Hospital v. Equal Employment Opportunity Comm'n, 28 Empl. Prac. Dec. ¶ 32,585 at 24,642, 1982 WL 209 (E.D. La. 1982).

Number of Page(s)	Document Name Redaction/Exemption	Document Date	Page Number
1	Documents relating to Settlement/Mediation/Conciliation Ex. (b)(7)(A)	08/03/2022	100

(b)(7)(C)

Exemption (b)(7)(C) to the Freedom of Information Act (FOIA), 5 U.S.C. § 552(b)(7)(C) (2016), as amended by the FOIA Improvement Act of 2016, Pub. L. No. 114-185, 130 Stat. 538, authorizes the Commission to withhold:\n\nrecords or information compiled for law enforcement purposes, but only to the extent that the production of such law enforcement records or information . . . (C) could reasonably be expected to constitute an unwarranted invasion of personal privacy\n\nThe seventh exemption applies to civil and criminal investigations conducted by regulatory agencies. Abraham & Rose, P.L.C. v. United States, 138 F.3d 1075, 1083 (6th Cir. 1998). Release of statements and identities of witnesses and subjects of an investigation creates the potential for witness intimidation that could deter their cooperation. National Labor Relations Board v. Robbins Tire and Rubber Co., 437 U.S. 214, 239 (1978); Manna v. United States Dep't. of Justice, 51 F.3d 1158, 1164 (3d Cir. 1995). Disclosure of identities of employee-witnesses could cause "problems at their jobs and with their livelihoods." L&C Marine Transport, Ltd. v. United States, 740 F.2d 919, 923 (11th Cir. 1984).\n\nThe Supreme Court has explained that only "[o]fficial information that sheds light on an agency's performance of its statutory duties" merits disclosure under FOIA, and noted that "disclosure of information about private citizens that is accumulated in various governmental files" would "reveal little or nothing about an agency's own conduct." United States Dep't of Justice v. Reporters Comm. for Freedom of the Press, 489 U.S. 749, 773 (1989).\n\nFor the purposes of determining what constitutes an unwarranted invasion of personal privacy under exemption (b)(7)(C), the term "personal privacy" only encompasses individuals, and does not extend to the privacy

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interests of corporations. FCC v. AT&T Inc., 131 S.Ct. 1177, 1178 (2011).

Number of Page(s)	Document Name Redaction/Exemption	Document Date	Page Number
1	Various Documents Personal Identifying Information Ex. (b)(7)(C)	07/26/2022	1

For a full description of the exemption codes used please find them at the following URL:

<https://www.eeoc.gov/foia/freedom-information-act-reference-guide>

This response was prepared by Bridget Lange, Government Information Specialist, who may be reached at bridget.lange@eeoc.gov.



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

Philadelphia District Office
801 Market St, Suite 1000
Philadelphia, PA 19107
(267) 589-9700
Website: www.eeoc.gov

NOTICE OF CHARGE OF DISCRIMINATION

(This Notice replaces EEOC FORM 131)

07/26/2022

To: Linda Berry
Senior Director, Employee & Labor Relations
ROBERT PACKER HOSPITAL
1 Guthrie Square
Sayre, PA 18840

This is notice that a charge of employment discrimination has been filed with the EEOC against your organization by Claudia R DiBlasi under: The Americans With Disabilities Act of 1990 (ADA), The Age Discrimination in Employment Act of 1967 (ADEA), Title VII of the Civil Rights Act of 1964 (Title VII). The circumstances of the alleged discrimination are based on Age, Disability, Sex, and involve issues of Reasonable Accommodation, Terms/Conditions, Other Issue Not Listed Above that are alleged to have occurred on or about 06/01/2022.

The Digital Charge System makes investigations and communications with charging parties and respondents more efficient by digitizing charge documents. The charge is available for you to download from the EEOC Respondent Portal, the EEOC's secure online system.

Please follow these instructions to view the charge within ten (10) days of receiving this Notice:

1. Access the EEOC's secured online system at <https://arc.eeoc.gov/rsp/login.jsf>
2. Enter this EEOC Charge No.: 17F-2022-61071
3. Enter this password: (b) (6), (b) (7)(C)

Once you log into the system, you can view and download the charge, and electronically submit documents to EEOC. The system will also advise you of possible actions or responses and identify your EEOC point of contact for this charge.

If you are unable to log into the EEOC Respondent Portal or have any questions regarding it, you may send an email to PDOContact@eeoc.gov.

EEOC0007

Preservation of Records Requirement When a Charge has Been Filed

The EEOC regulations require respondents to preserve all payroll and personnel records relevant to the charge until final disposition of the charge or litigation. 29 CFR §1602.14. For more information on your obligation to preserve records, see <http://eeoc.gov/employers/recordkeeping.cfm>.

Non-Retaliation Requirements

The laws enforced by the EEOC prohibit retaliation against any individual because s/he has filed a charge, testified, assisted or participated in an investigation, proceeding or hearing under these laws. Persons filing charges of discrimination are advised of these Non-Retaliation Requirements and are instructed to notify the EEOC if any attempt at retaliation is made. For more information, see <http://www.eeoc.gov/laws/types/facts-retal.cfm>.

Legal Representation

Although you do not have to be represented by an attorney while we handle this charge, you have a right, and may wish to retain an attorney to represent you. If you do retain an attorney, please provide the attorney's contact information when you log in to the online system.

Please retain this notice for your records.



U.S. Equal Employment Opportunity Commission

FEDERAL INVESTIGATION: REQUEST FOR POSITION STATEMENT AND SUPPORTING DOCUMENTARY EVIDENCE

The EEOC hereby requests that your organization submit within 30 days a Position Statement setting forth all facts which pertain to the allegations in the charge of discrimination under investigation, as well as any other facts which you deem relevant for the EEOC's consideration.

We recommend you review the EEOC's resource guide on "[Effective Position Statements](#)" as you prepare your response to this request.

Fact-Based Position Statement

This is your opportunity to raise any and all defenses, legal or factual, in response to each of the allegations of the charge. The position statement should set forth all of the facts relevant to respond to the allegations in the charge, as well as any other facts the Respondent deems pertinent to the EEOC's consideration. The position statement should only refer to, but not identify, information that the Respondent asserts is sensitive medical information, or confidential commercial or financial information.

The EEOC also requests that you submit all documentary evidence you believe is responsive to the allegations of the charge. If you submit only an advocacy statement, unsupported by documentary evidence, the EEOC may conclude that Respondent has no evidence to support its defense to the allegations of the charge.

The EEOC may release your position statement and non-confidential attachments to the Charging Party and their representative and allow them to respond to enable the EEOC to assess the credibility of the information provided by both parties. It is in the Respondent's interest to provide an effective position statement that focuses on the facts. The EEOC will not release the Charging Party's response, if any, to the Respondent.

If no response is received to this request, the EEOC may proceed directly to a determination on the merits of the charge based on the information at its disposal.

Signed by an Authorized Representative

The Position Statement should be signed by an officer, agent, or representative of Respondent authorized to speak officially on its behalf in this federal investigation.

Segregate Confidential Information into Separately Designated Attachments

If you rely on confidential medical or commercial information in the position statement, you should provide such information in separate attachments to the position statement labeled "Sensitive Medical Information," "Confidential Commercial or Financial Information," or "Trade Secret Information" as applicable. Provide an explanation justifying the confidential nature of the information contained in the attachments. Medical information about the Charging Party is not sensitive or confidential medical information in relation to the EEOC's investigation.

Segregate the following information into separate attachments and designate them as follows:

- a. Sensitive medical information, except the Charging Party's medical information
- b. Social Security Numbers
- c. Confidential commercial or financial information
- d. Trade secrets information
- e. Non-relevant personally identifiable information of witnesses, comparators or third parties, for example, social security numbers, dates of birth in non-age cases, home addresses, personal phone numbers and email addresses, etc.
- f. Any reference to charges filed against the Respondent by other charging parties

Requests for an Extension

If Respondent believes it requires additional time to respond, it must, at the *earliest possible time* in advance of the due date, make a written request for extension, explain why an extension is necessary, and specify the amount of additional time needed to reply. Submitting a written request for extension of time does not automatically extend the deadline for providing the position statement.

Upload the Position Statement and Attachments into the Respondent Portal

You can upload your position statement and attachments into the Respondent Portal using the **+ Upload Documents** button. Select the “Position Statement” Document Type and click the **Save Upload** button to send the Position Statement and attachments to EEOC. Once the Position Statement has been submitted, you will not be able to retract it via the Portal.



**U.S. Equal Employment Opportunity Commission
Notification & Acknowledgement of Dual-Filed Charge**

(This Notice replaces EEOC FORM 212-A)

07/08/2022

EEOC Number: 17F-2022-61071

FEPA Number: 202102482PA

This is notice that a charge of employment discrimination, Claudia DiBlasi v. GUTHRIE HEALTH CARE SYSTEM was initially received by Pennsylvania Human Relations Commission on 06/06/2022 and will be dual-filed with Philadelphia District Office.

Pursuant to the worksharing agreement, the Pennsylvania Human Relations Commission intends to Investigate Charge.

The Philadelphia District Office acknowledges receipt of the referenced charge, Claudia DiBlasi v. GUTHRIE HEALTH CARE SYSTEM, and intends to Defer Investigation.

Issued by:

Pennsylvania Human Relations Commission

Issued on:

07/08/2022

Acknowledged by:

Philadelphia District Office

Acknowledged on:

07/08/2022



**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
Philadelphia District Office**

801 Market Street, Suite 1000
Philadelphia, PA 19107-3126
Main: (267) 589-9700
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Fax: (215) 440-2606
Website: www.eeoc.gov

GUTHRIE HEALTHCARE SYSTEM
ROBERT PACKER HOSPITAL 1 GUTHRIE SQ
SAYRE, PA 18840

Via Respondent Portal

Re: Claudia R. DiBlasi v. GUTHRIE HEALTHCARE SYSTEM
EEOC Charge No.: 17F-2022-61071

Respondent is hereby requested to submit the following information and records relevant to the subject Charge of Discrimination. The Commission is required by law to investigate Charges filed with it, and this request constitutes part of the investigation.

This request for information does not necessarily represent the entire body of evidence which the EEOC need to obtain during the investigation. You are reminded to preserve all documents, applications, applicant flow logs, new hire kits, personnel files, personnel records and electronic records relevant to this action until final disposition. Any and all information related to this Request for Information, including any and all documents and emails related in any way, are considered relevant and must be preserved under the EEOC's record-keeping regulations. The information will only be disclosed in accordance with 29 C.F.R. 1601.22, or otherwise made public if the matter results in litigation.

1. Produce Charging Party's complete personnel file, including but not limited to all job applications (including internal job applications), resumes, employment references, interview offers, pre-employment-interview notes, offers of employment, work schedules, leave documents, documents concerning the establishment of or any adjustments to Charging Party's regular rate of pay, training records, complaints of discrimination or harassment or other workplace mistreatment filed by or against Charging Party, performance evaluations, disciplinary notices, commendation notices, letters of resignation, termination notices, and exit-interview notes.

2. Provide all manuals, policies, procedures, handbooks, guidelines, instructions, notices, directives, training materials, and other documents that were provided to employees, including managerial and supervisory employees, in effect at the time Charging Party applied for employment with and/or was employed by Respondent.

Please upload your response within twenty (20) calendar days of receiving this request directly through the Respondent Portal.



- Expected delivery date specified for domestic use.
- Most domestic shipments include up to \$50 of insurance (restrictions apply).*
- USPS Tracking® included for domestic and many international destinations.
- Limited international insurance.**
- When used internationally, a customs declaration form is required.

Insurance does not cover certain items. For details regarding claims exclusions see the Domestic Mail Manual at <http://ipm.usps.com>.
 * See International Mail Manual at <http://ime.usps.com> for availability and limitations of coverage.

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EP14F May 2020

OD: 12 1/2 x 9 1/2

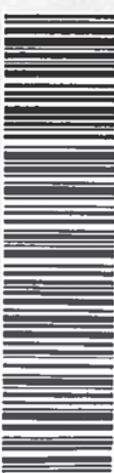


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US EEOC
 PHILADELPHIA REGIONAL OFFICE
 801 MARKET ST, STE 1000
 PHILADELPHIA PA 19107-3127

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9405 5092 0212 1626 3824 81

EEOC0013

RFE LAW

105 Rutgers Avenue #249
Swarthmore, Pennsylvania 19081
Phone: 1.888.973.3529
Fax: 1.888.251.2657
<http://www.rfelawfirm.com>

October 10, 2022

VIA USPS PRIORITY MAIL

No. 9405 5092 0212 1626 3824 81

United States Equal Employment Opportunity Commission
Philadelphia District Office
801 Market Street, Suite 1000
Philadelphia, Pennsylvania 19107-3126

**RE: My Client: Claudia R. DiBlasi, DO
Employer: Guthrie Robert Packer Hospital
EEOC Charge No.: 17F-2022-61071**

REQUESTING EXTENSION TO RESPOND TO EMPLOYER'S POSITION STATEMENT

Dear Sir/Madam:

I have been consulted by Claudia R. DiBlasi, DO ("Dr. DiBlasi") concerning the investigation of the above-referenced charge. Dr. DiBlasi reports that she has received an electronic notification from the EEOC that the Employer has provided a Position Statement. The notice also requests Dr. DiBlasi to provide a response to the Position Statement before October 17, 2022. To date, however, Dr. DiBlasi has not actually been provided with a copy of the Employer's Position Statement. When she attempted to access her case via the EEOC Public Portal, nothing is available except for a notice indicating that her charge is now being investigated by the Pennsylvania Human Relations Commission ("PHRC") as set forth in the enclosed screenshot.

When Dr. DiBlasi contacted the PHRC, she was advised that the PHRC has not received anything related to this charge from the EEOC. Upon receipt of this letter, kindly provide Dr. DiBlasi with an update concerning the status of the investigation of her charge and provide her with a copy of the Position Statement directly via email to [Personal Identifier]. Dr. DiBlasi is also requesting an extension of time to respond to the Employer's position statement of twenty (20) days from the date on which she receives a copy of the same.

RFE LAW FIRM, LLC

Delaware Valley: 105 Rutgers Avenue #249 • Swarthmore, Pennsylvania 19081
Central Pennsylvania: 333 North Vesper Street • Lock Haven, Pennsylvania 17745
Philadelphia: 3510 Baring Street • Philadelphia, Pennsylvania 19104

RFE LAW

105 Rutgers Avenue #249
Swarthmore, Pennsylvania 19081
Phone: 1.888.973.3529
Fax: 1.888.251.2657
<http://www.rfelawfirm.com>

The purpose of this letter is solely to assist Dr. DiBlasi in determining the status of the investigation of her charge and to request that she should be provided with an extension of time to respond to the Position Statement after she receives a copy of the same. Please be advised that you may and should communicate directly with Dr. DiBlasi. Dr. DiBlasi has requested that the EEOC should investigate and prosecute the charge on her behalf. My firm will not have any ongoing role in the matter unless the EEOC closes its investigation and issues a Right to Sue letter.

Thank you for your attention to this matter.

Sincerely,



ROBERT ENGLER

RFE:pps
Enclosures
cc: Claudia DiBlasi, DO

RFE LAW FIRM, LLC

Delaware Valley: 105 Rutgers Avenue #249 • Swarthmore, Pennsylvania 19081
Central Pennsylvania: 333 North Vesper Street • Lock Haven, Pennsylvania 17745
Philadelphia: 3510 Baring Street • Philadelphia, Pennsylvania 19104



U.S. Equal Employment Opportunity Commission

Welcome, Claudia | Log Out

Case Message

Your charge **17F-2022-61071** is currently being investigated by **Pennsylvania Human Relations Commission** and is not available in the EEOC Public Portal. Please contact **(717) 787-4410** for any questions regarding your charge and to submit any documentation related to your charge.

[Return to Home](#) | [Return to My Cases](#)



BRITTANY DOBROWOLSKI

From: Claudia DiBlasi <Personal Identifier>
Sent: Monday, December 5, 2022 1:51 PM
To: BRITTANY DOBROWOLSKI
Subject: Re: Charge No. 17F-2022-61071 - Dibiasi v. Guthrie Healthcare System
Attachments: Response Due December 5, 2022.pdf

Good afternoon.

Please see my response in the attached pdf file. Please let me know if you have any questions or need additional information. Thank you.

Sincerely,
Claudia

On Tue, Nov 22, 2022 at 12:44 PM Claudia DiBlasi [Personal Identifier] wrote:
I will. Thank you.

On Mon, Nov 21, 2022 at 7:00 AM BRITTANY DOBROWOLSKI <BRITTANY.DOBROWOLSKI@eeoc.gov> wrote:

Ms. DiBlasi,

Please any additional documentation that you believe is relevant on or before December 5, 2022.

Sincerely,



Brittany Dobrowolski

Senior Federal Investigator

U.S. Equal Employment Opportunity Commission

801 Market Street, Suite 1000

Philadelphia, PA 19107-3127

Direct Phone Line: 267-589-9740

Fax: 215-440-2604

From: Claudia DiBlasi [REDACTED] **Personal Identifier**
Sent: Tuesday, November 15, 2022 9:51 AM
To: BRITTANY DOBROWOLSKI <BRITTANY.DOBROWOLSKI@EEOC.GOV>
Subject: Re: Charge No. 17F-2022-61071 - Diblasi v. Guthrie Healthcare System

Good morning.

I have some information regarding the Depression diagnosis. This concerns being sent to an outside facility in May 2021. I did not provide this information because I was under the impression that it was outside of the reporting period. But if it is not, I would like to send that to you.

I am away several days this week for follow-up in Boston where I had surgery. If you would like me to provide this information, I respectfully request an extension in order to provide it.

Thank you,

Claudia

On Mon, Nov 14, 2022 at 4:25 PM BRITTANY DOBROWOLSKI <BRITTANY.DOBROWOLSKI@eeoc.gov> wrote:

Received – thank you. I understand you requested additional time to provide a response. I was out of the office the day of your email. Kindly inform me whether you need additional time to supply additional evidence.

Respectfully,



Brittany Dobrowolski

Senior Federal Investigator

U.S. Equal Employment Opportunity Commission

801 Market Street, Suite 1000

Philadelphia, PA 19107-3127

Direct Phone Line: 267-589-9740

Fax: 215-440-2604

From: Claudia DiBlasi [REDACTED] Personal Identifier

Sent: Sunday, November 13, 2022 8:32 PM

To: BRITTANY DOBROWOLSKI <BRITTANY.DOBROWOLSKI@EEOC.GOV>

Subject: Re: Charge No. 17F-2022-61071 - Dibiasi v. Guthrie Healthcare System

CAUTION: The sender of this message is external to the EEOC network. Please use care when clicking on links and responding with sensitive information. Forward suspicious emails to phishing@eeoc.gov.

Good morning, Ms. Dobrowolski.

Please see my response which is attached. There are five files attached to this email.

Thank you,

Claudia

On Fri, Nov 11, 2022 at 1:58 PM Claudia DiBlasi [REDACTED] Personal Identifier wrote:

Good afternoon, Ms. Dobrowolski.

I am working on the rebuttal and was hoping to be able to provide it to you by November 14th. However, I had surgery November 1st, and am still in the early stages of recovery. Would it be possible to have a two week extension to the deadline to provide the rebuttal?

Thank you,

Claudia

On Mon, Oct 24, 2022 at 10:04 AM BRITTANY DOBROWOLSKI <BRITTANY.DOBROWOLSKI@eeoc.gov> wrote:

Ms. Dibiasi,

I have recently been assigned the charge you filed against Respondent (Guthrie Healthcare System).Attached to this email is the position statement and the exhibits. The Commission requests for the rebuttal statement to be provided on or before November 14, 2022. The rebuttal is your chance to explain how Respondent's position is inaccurate as well as to provide any additional evidence that you believe is relevant to your case. There is no required format to provide a rebuttal.

If you have any questions, please do not hesitate to contact me.

Thank you,



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Philadelphia, PA 19107-3127

Direct Phone Line: 267-589-9740

||||| Fax: 215-440-2604

BRITTANY DOBROWOLSKI

From: Claudia DiBlasi **Personal Identifier**
Sent: Tuesday, November 22, 2022 12:44 PM
To: BRITTANY DOBROWOLSKI
Subject: Re: Charge No. 17F-2022-61071 - Dibiasi v. Guthrie Healthcare System

I will. Thank you.

On Mon, Nov 21, 2022 at 7:00 AM BRITTANY DOBROWOLSKI <BRITTANY.DOBROWOLSKI@eeoc.gov> wrote:

Ms. DiBlasi,

Please any additional documentation that you believe is relevant on or before December 5, 2022.

Sincerely,



Brittany Dobrowolski

Senior Federal Investigator

U.S. Equal Employment Opportunity Commission

801 Market Street, Suite 1000

Philadelphia, PA 19107-3127

Direct Phone Line: 267-589-9740

Fax: 215-440-2604

From: Claudia DiBlasi **Personal Identifier**
Sent: Tuesday, November 15, 2022 9:51 AM
To: BRITTANY DOBROWOLSKI <BRITTANY.DOBROWOLSKI@EEOC.GOV>
Subject: Re: Charge No. 17F-2022-61071 - Dibiasi v. Guthrie Healthcare System

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Follow Up Flag: Follow up
Flag Status: Completed

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Sent: Sunday, November 13, 2022 8:32 PM
To: BRITTANY DOBROWOLSKI
Subject: Re: Charge No. 17F-2022-61071 - Diblasi v. Guthrie Healthcare System
Attachments: response November 13, 2022.pdf; Acceptance and Transfer of Residents Policy.pdf; Gmail - Fw .pdf; Gmail - Fw Anesthesiology Residency.pdf; Gmail - FW Resident transferring within Guthrie.pdf

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Brittany Dobrowolski

Senior Federal Investigator

U.S. Equal Employment Opportunity Commission

801 Market Street, Suite 1000

Philadelphia, PA 19107-3127

Direct Phone Line: 267-589-9740

Fax: 215-440-2604

BRITTANY DOBROWOLSKI

From: Claudia DiBlasi · Personal Identifier
Sent: Friday, November 11, 2022 1:59 PM
To: BRITTANY DOBROWOLSKI
Subject: Re: Charge No. 17F-2022-61071 - Diblasi v. Guthrie Healthcare System

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Thank you,



Brittany Dobrowolski

Senior Federal Investigator
U.S. Equal Employment Opportunity Commission
801 Market Street, Suite 1000
Philadelphia, PA 19107-3127
Direct Phone Line: 267-589-9740
Fax: 215-440-2604

DAVID HOLOHAN

From: DAVID HOLOHAN
Sent: Thursday, August 4, 2022 6:23 AM
To: Kiger, Krista M.
Cc: Andrisano, Anthony (T.J.); Kuhl, Alyssa L.; Stewart, Erica L.
Subject: RE: Claudia R. DiBlasi v. Guthrie Health Care System; EEOC Charge No. No. 17F-2022-61071

Good morning,
The request has been granted.

Respectfully,

David Holohan
Senior Investigator
U.S. Equal Employment Opportunity Commission
Philadelphia District Office
801 Market Street, Suite 1000
Philadelphia, PA 19107-3127
(267) 589-9710 – direct dial

From: Kiger, Krista M. <krista.kiger@bipc.com>
Sent: Wednesday, August 3, 2022 12:37 PM
To: CASEY CALLAHAN <CASEY.CALLAHAN@EEOC.GOV>
Cc: Andrisano, Anthony (T.J.) <anthony.andrisano@bipc.com>; Kuhl, Alyssa L. <alyssa.kuhl@bipc.com>; Stewart, Erica L. <erica.stewart@bipc.com>
Subject: Claudia R. DiBlasi v. Guthrie Health Care System; EEOC Charge No. No. 17F-2022-61071

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Casey,

Good afternoon. Attached please find a courtesy copy of Respondent's request for extension of time to respond – until September 23rd – for both the position statement and RFI response.

Kindly confirm receipt of the same.

Thank you.

Krista

Krista Kiger
Paralegal

409 North Second Street
Suite # 500
Harrisburg, PA 17101-1357
717 237 4971 (o)
717 233 0852 (f)
krista.kiger@bipc.com

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Buchanan Ingersoll & Rooney PC

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DAVID HOLOHAN

From: Stewart, Erica L. <erica.stewart@bipc.com>
Sent: Friday, September 23, 2022 3:39 PM
To: CASEY CALLAHAN
Cc: Andrisano, Anthony (T.J.); Kuhl, Alyssa L.; Kiger, Krista M.
Subject: Claudia DiBlasi/Geisinger - EEOC# 17F-2022-61071
Attachments: DiBlasi- EEOC Position Statement 9.23.22 (4891-2387-4101 v1).pdf; DiBlasi - SOP Exhibits 9.23.22 (4879-5418-7573 v1).pdf

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Dear Casey:

Attached please find Respondent's Statement of Position and Exhibits that were recently uploaded via the respondent's EEOC Portal. Thank you.

Erica L. Stewart
Practice Assistant

409 North Second Street
Suite # 500
Harrisburg, PA 17101-1357
717 237 4804 (o)
717 233 0852 (f)
erica.stewart@bipc.com

BIPC.com | [Twitter](#) | [LinkedIn](#)

Buchanan Ingersoll & Rooney PC

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DAVID HOLOHAN

From: DAVID HOLOHAN
Sent: Friday, September 30, 2022 8:06 AM
To: Kiger, Krista M.
Cc: Andrisano, Anthony (T.J.); Kuhl, Alyssa L.; Stewart, Erica L.
Subject: RE: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071

Good morning,
The EEOC is still investigating this matter nothing has changed. I am unsure why the Portal is doing that. Please contact Technical Support at digitalsupport@eeoc.gov or calling 1-(800) 569-7118

I'll will check if there is anything internally but Technical Support would be the fastest way to get it fixed.

Respectfully,

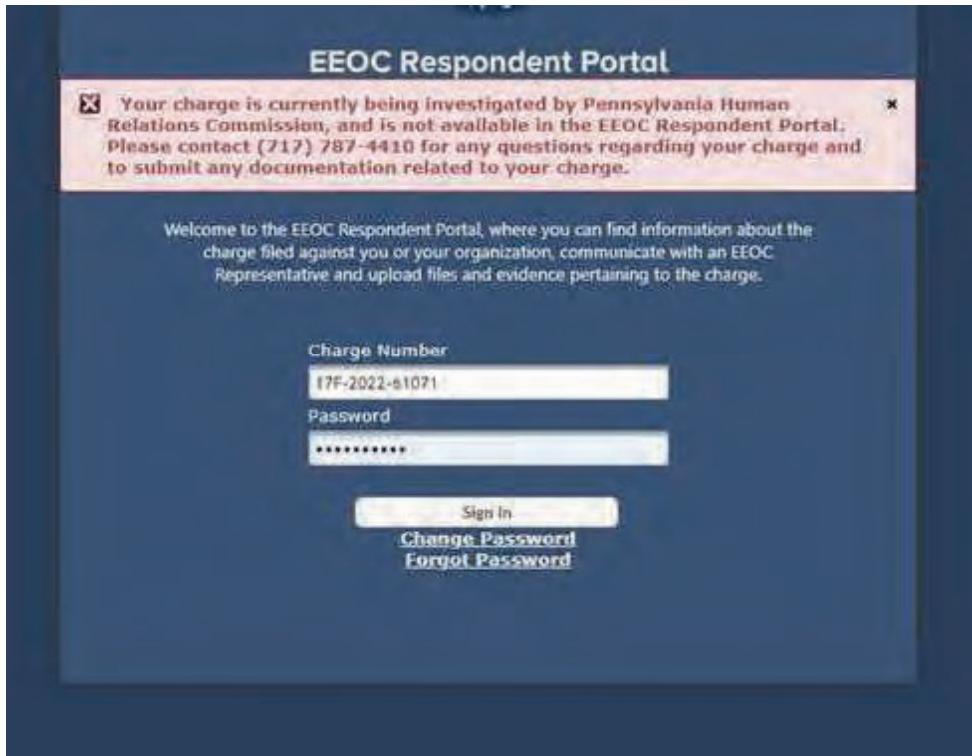
David Holohan
Enforcement Supervisor
U.S. Equal Employment Opportunity Commission
Philadelphia District Office
801 Market Street, Suite 1000
Philadelphia, PA 19107-3127
(267) 589-9710 – direct dial

From: Kiger, Krista M. <krista.kiger@bipc.com>
Sent: Wednesday, September 28, 2022 2:14 PM
To: CASEY CALLAHAN <CASEY.CALLAHAN@EEOC.GOV>
Cc: Andrisano, Anthony (T.J.) <anthony.andrisano@bipc.com>; Kuhl, Alyssa L. <alyssa.kuhl@bipc.com>; Stewart, Erica L. <erica.stewart@bipc.com>
Subject: FW: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071
Importance: High

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Krista

Krista Kiger
Paralegal

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Erica L. Stewart

Practice Assistant

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U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

Philadelphia District Office

801 Market St, Suite 1000

Philadelphia, PA 19107

(267) 589-9700

Website: www.eeoc.gov

DISMISSAL AND NOTICE OF RIGHTS ENCLOSED

April 13, 2023

Claudia R. DiBlasi
Personal Identifier
[REDACTED]

Re: Claudia R. DiBlasi v. GUTHRIE HEALTHCARE SYSTEM
EEOC Charge Number: 17F-2022-61071

The United States Equal Employment Opportunity Commission (EEOC) issued the enclosed Dismissal and Notice of Rights (Notice) in the above-referenced charge on the date reflected thereon. Specifically, on that date, EEOC sent you an email notification that EEOC had made a decision regarding the above-referenced charge and advised you to download a copy of the decision document from the Portal. Our records indicate you have not downloaded the Notice from the Portal. For your convenience, a copy of the Notice is enclosed with this letter.

Please note that if you want to pursue this matter further in court, you must file a lawsuit within 90 days of the date you receive the Notice. The 90-day period for filing a private lawsuit cannot be waived, extended, or restored by the EEOC.

We hope this information is helpful. If you have questions, please contact the District Office by telephone at (267) 589-9700 or email at PDOCONTACT@EEOC.GOV.

Sincerely,

Intake Staff
Charge Receipt/Technical Information Unit

Enclosure

EEOC0039

BRITTANY DOBROWOLSKI

From: BRITTANY DOBROWOLSKI
Sent: Thursday, December 1, 2022 7:29 PM
To: Krista M. Kiger
Subject: RE: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071

Ms. Kiger,

Thank you for your email. I have been assigned the above listed matter for investigation. Currently there is nothing pending nor overdue on the above listed matter. If resetting the password with using linda.berry@guthrie.org (who the charge was initially sent to) and the charge number doesn't work, I cannot provide you with any further assistance as I, unfortunately, do not have any access to troubleshooting the Respondent portal. Nevertheless, if I need anything further to complete my investigation on the above matter, I will always send it by email and upload it to the portal. I apologize for the inconvenience.

Sincerely,



Brittany Dobrowolski
Senior Federal Investigator
U.S. Equal Employment Opportunity Commission
801 Market Street, Suite 1000
Philadelphia, PA 19107-3127
Direct Phone Line: 267-589-9740
Fax: 215-440-2604

From: Krista M. Kiger <krista.kiger@bipc.com>
Sent: Tuesday, November 29, 2022 4:43 PM
To: DAVID HOLOHAN <DAVID.HOLOHAN@EEOC.GOV>
Subject: FW: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071

Good afternoon. I followed up with Tech Support but they were not able to assist. I also did a password request to make sure nothing had changed on that end, and was still unable to access the charge with the correct password. Would you kindly double-check whether this was, indeed, transferred back to the PHRC? I appreciate your assistance; I just want to be sure we don't miss any deadlines and/or other notices.

Thank you.

Krista

Krista Kiger
Paralegal

409 North Second Street

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Subject: RE: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071

[This Email Originated From david.holohan@eeoc.gov Which Is External To The Firm]

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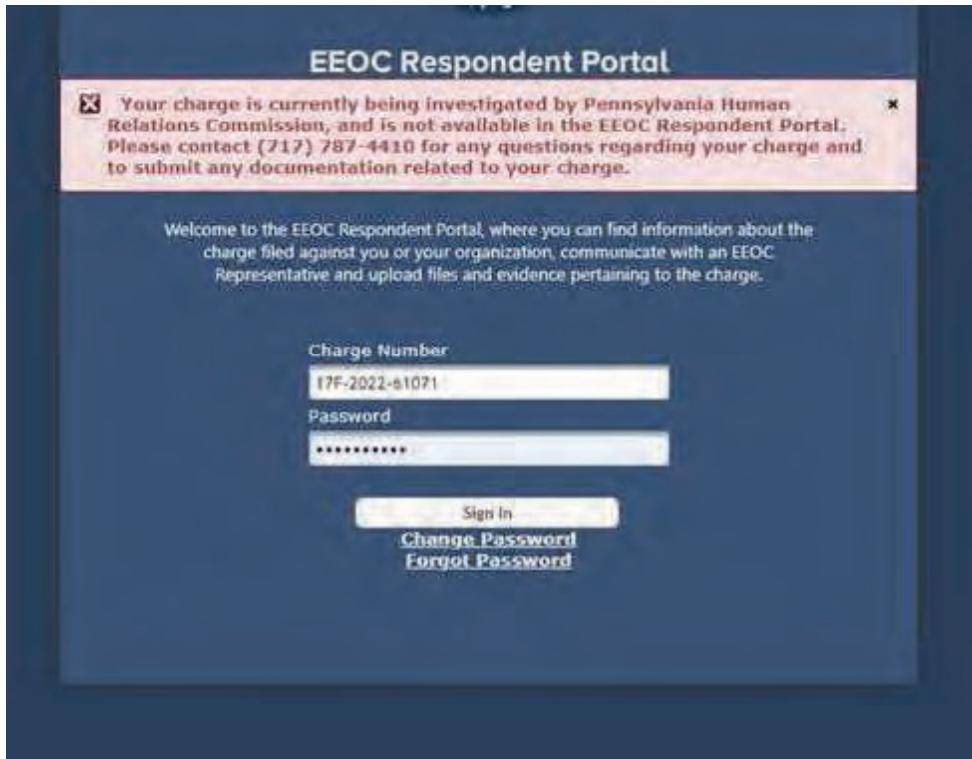
David Holohan
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Philadelphia District Office
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Subject: FW: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071
Importance: High

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Subject: Claudia DiBlasi/Geisinger - EEOC# 17F-2022-61071

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717 237 4804 (o)
717 233 0852 (f)
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BRITTANY DOBROWOLSKI

From: Krista M. Kiger <krista.kiger@bipc.com>
Sent: Wednesday, February 1, 2023 5:53 PM
To: BRITTANY DOBROWOLSKI
Cc: Anthony (T.J.) Andrisano; Alyssa L. Kuhl
Subject: RE: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071

Ms. Dobrowolski,

I hope this email finds you doing well. I'm just updating my files and had this one marked to follow up on. I greatly appreciate your willingness to forward any communications by email as well as via upload to the Portal; however, would you kindly confirm that there is still nothing pending and/or overdue in this matter so that I may document the same in my file?

Thank you again for your assistance!

Krista

Krista Kiger

Paralegal

409 North Second Street
Suite # 500
Harrisburg, PA 17101-1357
717 237 4971 (o)
717 233 0852 (f)
krista.kiger@bipc.com

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Buchanan Ingersoll & Rooney PC

From: BRITTANY DOBROWOLSKI <BRITTANY.DOBROWOLSKI@EEOC.GOV>
Sent: Thursday, December 01, 2022 7:29 PM
To: Krista M. Kiger <krista.kiger@bipc.com>
Subject: RE: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071

Ms. Kiger,

Thank you for your email. I have been assigned the above listed matter for investigation. Currently there is nothing pending nor overdue on the above listed matter. If resetting the password with using linda.berry@guthrie.org (who the charge was initially sent to) and the charge number doesn't work, I cannot provide you with any further assistance as I, unfortunately, do not have any access to troubleshooting the Respondent portal. Nevertheless, if I need anything further to complete my investigation on the above matter, I will always send it by email and upload it to the portal. I apologize for the inconvenience.

Sincerely,



Brittany Dobrowolski
Senior Federal Investigator
U.S. Equal Employment Opportunity Commission
801 Market Street, Suite 1000
Philadelphia, PA 19107-3127
Direct Phone Line: 267-589-9740
Fax: 215-440-2604

From: Krista M. Kiger <krista.kiger@bipc.com>
Sent: Tuesday, November 29, 2022 4:43 PM
To: DAVID HOLOHAN <DAVID.HOLOHAN@EEOC.GOV>
Subject: FW: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071

Good afternoon. I followed up with Tech Support but they were not able to assist. I also did a password request to make sure nothing had changed on that end, and was still unable to access the charge with the correct password. Would you kindly double-check whether this was, indeed, transferred back to the PHRC? I appreciate your assistance; I just want to be sure we don't miss any deadlines and/or other notices.

Thank you.

Krista

Krista Kiger
Paralegal

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Buchanan Ingersoll & Rooney PC

From: DAVID HOLOHAN <DAVID.HOLOHAN@EEOC.GOV>
Sent: Friday, September 30, 2022 8:06 AM
To: Kiger, Krista M. <krista.kiger@bipc.com>
Cc: Andrisano, Anthony (T.J.) <anthony.andrisano@bipc.com>; Kuhl, Alyssa L. <alyssa.kuhl@bipc.com>; Stewart, Erica L. <erica.stewart@bipc.com>
Subject: RE: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071

[This Email Originated From david.holohan@eeoc.gov Which Is External To The Firm]

Good morning,

The EEOC is still investigating this matter nothing has changed. I am unsure why the Portal is doing that. Please contact Technical Support at digitalsupport@eeoc.gov or calling 1-(800) 569-7118

I'll will check if there is anything internally but Technical Support would be the fastest way to get it fixed.

Respectfully,

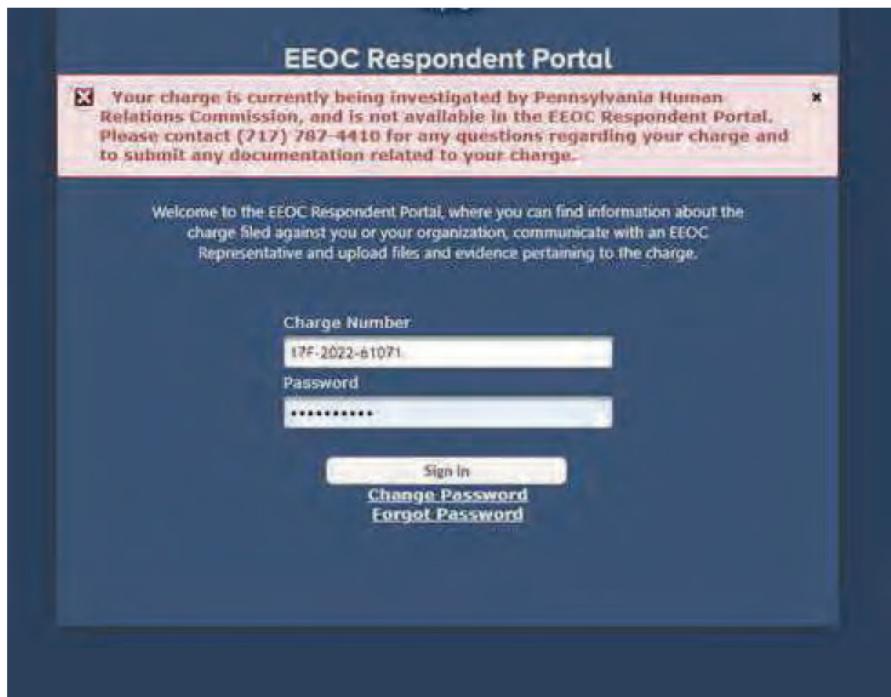
David Holohan
Enforcement Supervisor
U.S. Equal Employment Opportunity Commission
Philadelphia District Office
801 Market Street, Suite 1000
Philadelphia, PA 19107-3127
(267) 589-9710 – direct dial

From: Kiger, Krista M. <krista.kiger@bipc.com>
Sent: Wednesday, September 28, 2022 2:14 PM
To: CASEY CALLAHAN <CASEY.CALLAHAN@EEOC.GOV>
Cc: Andrisano, Anthony (T.J.) <anthony.andrisano@bipc.com>; Kuhl, Alyssa L. <alyssa.kuhl@bipc.com>; Stewart, Erica L. <erica.stewart@bipc.com>
Subject: FW: Claudia DiBlasi/Guthrie Clinic - EEOC# 17F-2022-61071
Importance: High

CAUTION: The sender of this message is external to the EEOC network. Please use care when clicking on links and responding with sensitive information. Forward suspicious emails to phishing@eeoc.gov.

Casey,

Good afternoon. I just tried to access this charge on the portal and am getting the following message:



Our understanding is that the EEOC was leading the investigation because the PHRC lacked jurisdiction (per their letter 7/27/22). Are you able to provide any information and/or documentation that would have occurred on the portal since we uploaded our position statement last Friday?

Thank you!

Krista

Krista Kiger

Paralegal

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krista.kiger@bipc.com

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Buchanan Ingersoll & Rooney PC

From: Stewart, Erica L. <erica.stewart@bipc.com>
Sent: Friday, September 23, 2022 3:39 PM
To: CASEY.CALLAHAN@EEOC.GOV
Cc: Andrisano, Anthony (T.J.) <anthony.andrisano@bipc.com>; Kuhl, Alyssa L. <alyssa.kuhl@bipc.com>; Kiger, Krista M. <krista.kiger@bipc.com>
Subject: Claudia DiBlasi/Geisinger - EEOC# 17F-2022-61071

Dear Casey:

Attached please find Respondent's Statement of Position and Exhibits that were recently uploaded via the respondent's EEOC Portal. Thank you.

Erica L. Stewart

Practice Assistant

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Harrisburg, PA 17101-1357
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Buchanan Ingersoll & Rooney PC

Anthony (T.J.) Andrisano
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Harrisburg, PA 17101
T 717 237 4800
F 717 233 0852
www.buchananingersoll.com

August 3, 2022

VIA EEOC RESPONDENT PORTAL
& ELECTRONIC MAIL

Casey Callahan
U.S. Equal Employment Opportunity Commission
Philadelphia District Office
801 Market Street, Suite 1000
Philadelphia, PA 19107-3126
Casey.callahan@eeoc.gov

**Re: Claudia R. DiBlasi v. Guthrie Health Care System
EEOC Charge No. No. 17F-2022-61071**

Dear Casey:

As you are aware, the Statement of Position is currently due on or before August 25, 2022. We were also just made aware that a response to the Request for Information is due on or before August 15, 2022. Due to anticipated delays resulting from Respondent and counsel's vacation schedules, we respectfully request an initial extension, up to and including September 23, 2022, to submit both the Statement of Position and the RFI Response in the above-referenced matter.

Thank you in advance for your understanding and, to the extent we do not hear otherwise, we will presume our requested extension is approved. Please do not hesitate to contact our office if you have any questions.

Very truly yours,

/s/ Anthony (T.J.) Andrisano

Anthony (T.J.) Andrisano

Exhibit A



Equal Employment and Employment Law the Guthrie Clinic

POLICY:

The Guthrie Clinic (TGC) supports the principles of equal employment opportunity and will not discriminate with respect to race, color, religion, gender, gender identity/expression, national origin, age, creed, sexual orientation, the presence of a disability, marital, veteran's status, or any other basis prohibited by local, state or federal laws in any aspect of its employment or pre-employment practices. The Executive Vice President – Chief Caregiver Officer is designated by the CEO to be responsible for compliance with this policy. Work assignments, rates of pay and promotions will be determined on a nondiscriminatory basis considering various factors, including the skills, length or service, and quality of work of each individual.

Veterans have something special to offer. At Guthrie we value the leadership, loyalty, integrity and commitment to excellence instilled through participation in military service. As you enter into the next phase of your life and pursue a civilian career, we are committed to providing a work environment that will support your understanding of the many initiatives, partnerships and programs in place to help you thrive at Guthrie.



Exhibit B

**ROBERT PACKER HOSPITAL
HOUSE OFFICER AGREEMENT
2019 - 2020**

This Agreement is made and entered this 1st Day of July 2019, by and between, Claudia Renata DiBlasi, DO ("House Officer") and the Robert Packer Hospital ("Hospital").

BACKGROUND

The House Officer desires to obtain academic and clinical training at the Hospital, and the Hospital desires to offer the House Officer participation in a Residency Training Program.

TERMS

To this end, the Hospital and the House Officer hereby agree as follows:

- I. Eligibility for Participation in Residency Training Program
 - A. The House Officer hereby certifies that he/she:
 1. Is a graduate of a medical school in the United States or Canada accredited by the Liaison Committee on Medical Education (LCME) or
 2. Is a graduate of a college of osteopathic medicine in the United States accredited by the American Osteopathic Association (AOA); or
 3. Is a graduate of a medical school outside the United States and Canada and has met one of the following qualifications:
 - a. Has received a currently valid certificate from the Educational Commission for Foreign Medical Graduates prior to appointment;
 - b. Has a full and unrestricted license to practice medicine in a US licensing jurisdiction in which they are training; or
 - c. Is a graduate of a medical school outside the United States and has completed a Fifth Pathway program provided by an LCME-accredited medical school.
 4. Has not been suspended or excluded from participation in, or penalized by Medicaid, Medicare or any other state or federal reimbursement health care program.
 5. Is a citizen or permanent resident of the United States; or has a valid J-1, H-1 or work-eligible visa and a valid passport permitting employment and residency in the United States of America for the term of the Residency Training Program.

Exhibit B

- B. Has provided proper documentation for a post-graduate training license by the State Board of Medicine of the Commonwealth of Pennsylvania.
 - 1. Verification of Medical Education
 - 2. Certified copy of diploma
 - 3. Official transcript from medical school
 - 4. Updated Curriculum Vitae with no lapses in time from graduation from medical school.
 - 5. An official letter from previous program director if transferring from another accredited program in the United States.
 - 6. The House Officer shall maintain and provide to the Department of Medical Education a valid Pennsylvania Medical Training License commensurate with his/her level of training and with the PGY level stipulated in this Agreement. The House Officer shall immediately notify the Hospital if his/her license is under investigation, suspended, or revoked.
 - 7. If the House Officer fails to maintain a valid Pennsylvania Medical Training License, or is involved in behavioral or academic deficiencies considered severe enough to warrant possible dismissal, dismissal policy # *RPH-D-761-16, Adjudication of Grievances Policy RPH-D-761-01*, and relevant Human Resource Policies for dismissal will be followed.
- C. Before the training start date, the House Officer shall successfully complete all pre-employment requirements of Guthrie Human Resources Department, and a physical examination and toxicology screen, which will be conducted by the Hospital Employee Health Office.

II. House Officer Duties and Responsibilities

- A. A description of the educational experience of the Residency Training Program, including the nature of the assignments to other programs or institutions, is provided in Exhibit A, which is attached hereto and made part of this Agreement by reference.
- B. The House Officer's duties and responsibilities in the Residency Training Program will include, but not be limited to:
 - 1 Developing a personal program of self-study and professional growth in compliance with Accreditation Council for Graduate Medical Education (ACGME)/American Osteopathic Association (AOA) requirements and competencies, and with guidance from the teaching staff;
 - 2 Participating in safe, effective and compassionate patient care, under the supervision commensurate with his/her level of knowledge, training and skill;
 - 3 Participating in quality improvement initiatives and acknowledging the increasing importance of their positive impact on patient safety.
 - 4 Participating fully in the educational activities of his/her program and, as required, assume responsibility for teaching and supervising other house officers and students;
 - 5 Participating in institutional and program orientation and activities involving the medical staff at the Hospital, and adhere to established practices, procedures and policies of the Hospital and the medical staff;

Exhibit B

6. Participating in institutional committees and councils, especially those that relate to patient care review activities;
7. Participating in the evaluation of the quality of education provided by the residency training program; and
8. Developing an understanding of ethical, medical/legal, socioeconomic and cost containment issues that affect the provision of patient care and graduate medical education.

C. The House Officer hereby agrees to comply with the Resident/Fellow Code of Professional Standard (Exhibit B).

D. Conditions for reappointment and promotion to a subsequent PGY level are outlined in the individual program policy regarding criteria for advancement (*Ref: RPH-D-778-003 - Post-Graduate Physician Trainee Promotion policy*).

E. The House Officer hereby agrees to obey and comply with all applicable rules, regulations, policies (including medical record policies), bylaws and practices of The Guthrie Clinic, Robert Packer Hospital, Guthrie Medical Group, PC, and any other clinical site. The House Officer accepts that, at any time and for any reason, rules, regulations, policies, bylaws and practices may be adopted, changed or amended. Failure of the House Officer to obey and comply with any of the above may lead to disciplinary or other adverse action, including, but not limited to, termination of this Agreement.

F. An Impartial Fair Procedure Review is available for House Officers placed on probation, suspension, denied renewal of contract, intent to renew but not promote to the next level of training, or dismissed and must be requested by the resident, in writing, to the Director of Medical Education, within five business days of the decision. (*Ref: Policy # RPH-D-761-01, Adjudication of Grievances*)

G. The House Officer hereby agrees to perform all medical services the Hospital conventionally associates with the Residency training program in a manner compliant with the standards of service established by the Hospital, the ACGME, the RRC for the relevant specialty, the AOA, Joint Commission on Accreditation of Healthcare Organizations and federal, state and local agencies.

H. The House Officer shall assist all attending physicians to comply with all Medicare documentation coding and billing regulations.

III. Confidential Information

The House Officer may not disclose any confidential information of Robert Packer Hospital, The Guthrie Clinic, and/or Guthrie Medical Group, including, but not limited to, patient and patient family information, unless required by law.

IV. Professional Liability Coverage

Hospital shall provide Residents with professional liability coverage in amounts required by law and with a summary of pertinent information regarding this coverage. Liability coverage must include legal defense and protection against awards from claims reported or filed after the completion of the program, if the alleged acts or omissions of the Residents are within the scope of the program. Said professional liability shall not provide coverage for any activity outside of the Residency training program.

House Officer agrees to fully cooperate in the investigation, review and/or defense of any events that arise from activities under this Agreement. This requirement to cooperate will continue after the expiration of this Agreement.

Exhibit B

V. Outside Work/ Moonlighting (Ref: RPH-D-761-09 - Moonlighting Policy)

- A. Residents with visas are not permitted to moonlight.
- B. It is expected that the House Officer shall devote the entirety of his/her working time to the Hospital and the Residency Training Program. Consistent with that obligation, it is hereby agreed that, before engaging in any outside work, the House Officer will seek written permission from the Program Director, who may prohibit the House Officer from performing medical services unrelated to the Residency Training Program at another health care facility or at the Hospital.
- C. If the House Officer provides services at another health care facility (other than services required by the Hospital to be performed at other health care facilities as part of the Residency Training Program), the Hospital will not indemnify the House Officer against claims arising out of the services provided at that facility. The House Officer hereby agrees to so inform that facility and provide Hospital with evidence of professional liability coverage for these activities.
- D. If the House Officer, who has obtained permission, performs medical services at another health care facility, he/she shall obey the rules and regulations which are applicable at that facility, so long as they do not conflict with this Agreement.
- E. The House Officer will address any questions regarding scope of responsibilities and indemnification to the Department of Medical Education.
- F. The name of Robert Packer Hospital, Guthrie Medical Group, The Guthrie Clinic or any of its derivatives, must not be used in any announcement, advertising matter, publication, correspondence or report in connection with personal or unofficial activities or services of the House Officer unrelated to the Residency Training Program, if such use in any way could be construed as implying Robert Packer Hospital, Guthrie Medical Group, or The Guthrie Clinic endorsement of any such project, product or service.

VI. Performance Evaluation

As the position of House Officer involves a combination of supervised, progressively more complex, independent patient evaluation and management functions, and formal education activities, the competence of the House Officer is evaluated on a regular basis. Records of the evaluations are maintained as confidential.

VII. House Officer Salary and Benefits

- A. The House Officer's stipend for the post-graduate training year is determined annually by the Department of Medical Education in conjunction with the Board of Robert Packer Hospital, and is communicated to the House Officer in writing prior to her/her start date. Stipends are paid on a bi-weekly basis. (Exhibit C).
- B. The Hospital, in conjunction with the Residency Program, shall determine and communicate policies regarding paid time away and leaves of absence. (Exhibit C).
- C. The Hospital and/or Residency Program may provide additional benefits to the House Officer. If the House Officer is eligible to receive these benefits, he/she will be informed by Human Resources and a description of the benefits will be made available. (Exhibit D).
- D. Any changes to the above stipends and benefits will be communicated to the fellow before the start date of resident training.

Exhibit B

VIII. Schedules

Schedules of assignments shall be posted in the House Officer's Department in a conspicuous location.

IX. Graduate Medical Education Policies and Procedures

- A. The Graduate Medical Education Department maintains and enforces policies and procedures governing various issues, including, but not limited to, the following: eligibility and selection, sexual harassment, duty hours, moonlighting, physician impairment, accommodation for disabilities, corrective action and review, evaluation and promotion, grievance procedures, interaction with vendors and corporations, on-call assignments, basic life support certification, meals and house staff parking.
- B. Specific policies and procedures are available in the House Staff Policy Manual, which is distributed annually to the House staff and is posted on the Guthrie Intranet. Departmental, program, and institution policies are posted in their entirety on the Guthrie Intranet.
- C. All House Officers must comply with the rules and regulations contained in the House Staff Manual, the Medical Staff Bylaws, and the Program, Department, and Hospital Policies.
- D. Residents and fellows are employees of the Robert Packer Hospital and are subject to all Human Resources Policies. Refer to online or policy manual.

X. Counseling (Ref: RPH-D-761-14- Post-Graduate Physician Trainee Counseling Policy)

- A. House Officers are provided guidelines for dealing with psychological stress, which includes formal counseling or psychiatric help and assessment of learning disabilities and psychological conditions that may interfere with learning. The goal of this process is restoration of the House Officer to full potential for training and practice.
 - 1 House Officers in need of assistance may access the program on their own initiative, or may be required to access the program through the Program Director or Designated Institutional Official
 - 2 This assistance will be provided at no cost to the House Officer, regardless, of who has mandated the referral.
 - 3 The Employee Assistance Program provides House Officers with a confidential source of assistance when it is recognized that they have personal problems that could pose a threat to their job, learning, or personal well-being.
 - 4 After an initial assessment by the EAP, if deemed necessary, House Officer will be referred for additional services provided outside of Guthrie.

XI. Leaves of Absence

Leaves of absence are available for short and long-term disability, family and medical leave, and bereavement (Exhibit C). All leave taken in excess of the ACGME/AOA and program-allocated time away will stop the educational clock and may extend the post-graduate year in which the leave was taken and the date of completion.

Exhibit B

XII. Closure

The Hospital will inform House Officer of adverse accreditation actions taken by the ACGME/AOA in a reasonable period of time after the action is taken. In the event that the Hospital begins the process of closing the Residency Training Program for accreditation reasons, or for other reasons, House Officer will be informed when reasonable. In case of such a closure, or in case of the closure of Hospital, the Hospital will cooperate with House Officer in his/her search for a new Resident position, according to Hospital policy.

XIII. On-Call Quarters

Hospital will supply suitable on-call quarters and access to food and drink, as apply to on-call responsibilities.

XIV. Terms of Agreement

The term of this House Officer Agreement is one (1) year, commencing on June 21, 2019 and ending on June 30, 2020 in the Family Medicine Residency Training Program. Early termination of this Agreement or reappointment as a House Officer for a subsequent year is dependent upon Department and/or Hospital policy and satisfactory performance by the House Officer.

A new appointment shall be pursuant to a new Agreement following successful completion of all promotion criteria set forth by the training program. A written notice of intent will be given to the resident when it is determined that an agreement will not be renewed, when a resident will not be promoted to the next level of training, or when that resident will be dismissed. Promotion policies are included in the Housestaff Manual that is given to each resident. (*RPH-D-778-003 - Post-Graduate Physician Trainee Promotion policy*)

XV. Miscellaneous Provisions

A. Governing Law

This Agreement shall be construed and enforced in accordance with the laws of the Commonwealth of Pennsylvania.

B. Jurisdiction

Both parties agree to the exclusive jurisdiction of the Courts of the Common Pleas of Bradford County, Pennsylvania in any action or proceeding pursuant to this Agreement.

C. Complete Agreement

This Agreement constitutes the entire Agreement between the parties and supersedes all previous Agreements or understandings. Except as expressly provided therein, no additions or changes may be made to this Agreement without the written consent of both parties.

D. Severability

In the event that any clause or provision of this Agreement (or the application of such clause or provision to a particular set of circumstances) is held or declared to be invalid, illegal or unenforceable, such holding or declaration shall not in any way affect the validity or enforceability of any other clause or provision of this Agreement (or the application of such clause or provision to a different set of circumstances).

E. Waiver or Default

Failure by the Hospital to enforce at any time, or for any period of time, any of the provisions hereof shall not be construed to be a waiver of such provisions nor of the right of the Hospital hereafter to enforce each and every provision.

Exhibit B

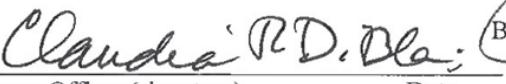
F. Captions

The captions to the paragraphs in this Agreement are included for convenience only and are not intended to modify or explain the terms of this Agreement.

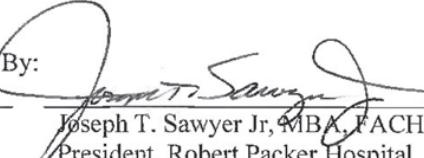
This House Officer Agreement will become a legal contract when signed by all signatories listed at the end of the Agreement.

IN WITNESS WHEREOF, and intending to be legally bound, House Officer and Hospital hereby execute this Agreement.

ROBERT PACKER HOSPITAL


House Officer (signature)

Date


By: Joseph T. Sawyer Jr, MBA, FACHE
President, Robert Packer Hospital
3/29/2019
Date

Claudia Renata DiBlasi, DO
House Officer (Print Name)


Donald Phykitt, DO
Program Director
Family Medicine Residency Program
Director of Osteopathic Medicine
3/18/19
Date

Personal Identifier

House Officer
Social Security Number


Brian Fillipo, MD
Designated Institutional Official
3/28/19
Date

My signature above signifies that I have read and have in possession the exhibits referenced in this Agreement

Exhibit B

EXHIBIT A

**Robert Packer Hospital
Position Description**

Job Title: **PGY-1 Family Medicine Resident**
Department: **Family Medicine Residency Program**
Reports to: **Program Director, Family Medicine Residency**

MAIN FUNCTION:

Family Medicine Residents learn the specialty of Family Medicine by active participation in patient care and educational activities. These activities must be in compliance with the Common and Program Requirements of the Accreditation Council for Graduate Medical Education or the American Osteopathic Association and the hospital's policies, procedures and regulatory requirements.

EDUCATION:

All Family Medicine Residents must earn the MD or DO Degree or equivalent from a recognized medical school. They must pass COMLEX or USMLE Steps-I, II and III as well as the clinical skills assessment. They must be effective communicators of English.

ESSENTIAL FUNCTIONS:

Patient Management Experience: PGY-1 Family Medicine Residents provide supervised patient care through inpatient experience as a junior resident on the Family Medicine Service and by two (2) weekly continuity clinics in the Family Medicine Center. PGY-1 residents also rotate through various inpatient subspecialty services including two months of family medicine service, OB/GYN, and night float/hospitalist service. Also included is one month of general surgery, emergency medicine, pediatric emergency medicine and cardiology. Outpatient rotations include family medicine clinic, pediatrics, sports medicine, orthopedics, behavioral sciences and community medicine.

The PGY-1 resident-specific duties include the following:

1. Perform a complete history and physical examination, develop a comprehensive differential assessment, and implement a complete care plan.
2. Order appropriate tests, communicate written and verbal orders to nursing staff and write prescriptions as indicated.
3. Communicate information about patients in an organized, concise and accurate manner through written and oral presentations.
4. Communicate effectively and empathetically with patients and their families concerning diagnosis, prognosis, therapeutic alternatives, informed consent and advanced directives and appropriately documenting these communications in the medical record.
5. Work and communicate effectively with attendings, consultants, patient care team members, hospital and FMC staff.
6. Complete daily progress notes on all patients using the problem-oriented format.
7. Communicate daily with the appropriate attendings about specific patients.
8. Maintain close contact with the FM Inpatient Teaching Physician about the Family Medicine Service.
9. Participate in emergency codes with senior residents.
10. Perform all consultations, under the supervision of the inpatient service faculty.
11. Perform initial emergency room evaluations of family medicine patients.
12. Participate in call as scheduled.

Exhibit B

13. Utilize or recommend appropriate community resources (social, service agencies, mental health services, recreational programs) when indicated.
14. Under preceptor guidance, manage patients in two assigned continuity clinics per week in the Family Medicine Center.
15. Attend all required family medicine and institutional teaching conferences each quarter unless alternative arrangements have been made.
16. Attend resident and/or resident-faculty group meetings and institutional committees unless alternative arrangements have been made.
17. Provide comprehensive and coordinated care by completing required medical forms and hospital charts in compliance with hospital policies.

CLINICAL LEARNING ENVIRONMENT REVIEW RESPONSIBILITIES

Patient Safety:

- Participate in inter-professional teams
- Attend and participate in assigned committee(s)
- Report errors, unsafe conditions and near misses

Quality Improvement:

- Use data to improve systems of care, reduce health care disparities and improvement patient outcomes
- Participate in program and institutional opportunities for quality improvement

Transitions of Care:

- Be aware of and practice standardized protocol for transitions of care of patients

Supervision:

- Follow institutional and program policies for supervision throughout residency training.
- Report deviations from requirements and/or retribution to DIO and/or GME Office

Duty Hours, Hours (policy # RPH-A-778-005), Fatigue Management and Mitigation:

- Have complete knowledge of the ACGME/AOA requirements for duty hours
- Enter duty hours into residency software timely and correctly
- Attend required teaching sessions on stress and fatigue

Professionalism:

- Accurately and judiciously report to program and GME Office (e.g., procedures, duty hours, etc)
- Fulfill program and institutional educational and professional responsibilities
- Complete all scholarly activities requirements

INDIRECT SUPERVISION:

With direct supervision immediately available - the supervising physician is physically within the hospital or other site of patient care, and is immediately available to provide Direct Supervision.

With direct supervision available - the supervising physician is not physically present within the hospital or other site of patient care, but is immediately available by means of telephonic and/or electronic modalities, and is available to provide Direct Supervision.

DIRECT SUPERVISION:

The supervising physician is physically present with the resident and patient.

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PROCEDURES:

The following procedures may be performed only under the **direct supervision** of a Family Medicine Faculty or other attending physician credentialed to perform the following procedures.

1. Central venous catheters
2. Arterial lines
3. Paracentesis
4. Lumbar puncture
5. Arthrocentesis
6. Flexible sigmoidoscopy to 60 cm with and without biopsy
7. Laceration repair
8. Artificial rupture of the membranes
9. Internal fetal scalp monitor electrode placement
10. Uncomplicated vaginal delivery
11. Repair of episiotomy, 2nd and 3rd degree lacerations
12. Induction and augmentation of labor
13. Fracture immobilization and casting
14. Change dressings
15. Debride wounds
16. Endotracheal intubation
17. Incise and drain abscesses
18. Foley catheterization
19. Thoracentesis
20. Peripheral IV insertion
21. Skin biopsy
22. Neonatal circumcision
23. Colposcopy
24. IUD insertion/removal
25. Cryotherapy
26. Osteopathic manipulation

The following procedures may be performed under **indirect supervision** with direct supervision immediately available by a Family Medicine Faculty or other attending physician credentialed to perform such procedures:

1. Peripheral intravenous catheter placement
2. Foley catheter placement
3. NG tube insertion
4. Arterial blood gas sampling
5. Management of emergency codes
6. Removal of central line
7. Removal of PICC line

Required Procedure Competencies:

Within the 36 months of FM residency training all residents must complete competency in performance of the following procedures:

1. Cerumen removal
2. Joint aspiration/injection
3. Toenail excision
4. Suture removal
5. Skin excisional Biopsy
6. Pap smear

Exhibit B

CALL:

PGY-1 Family Medicine Resident call is approximately 14-16 calls per year plus 1 assigned holiday call. Call hours are from 5 pm to 6 am on weekdays, weekends and holidays. Call duties involve evaluating Family Medicine patients in the Emergency Room, who are felt to be suitable candidates for hospital admission as well as providing ongoing care to patients already hospitalized on the inpatient Family Medicine Service. Further duties include, triaging, admitting and subsequent deliveries of OB/GYN patients, as well as pediatric admissions. PGY-1 residents are under the indirect supervision with direct supervision immediately available of a family medicine, hospitalist, OB/GYN, and/or pediatric attending physician, in concordance with the supervision of a senior Family Medicine Resident.

EDUCATIONAL ACTIVITIES:

PGY-1 Family Medicine Residents participate in regularly scheduled conferences including, but not limited to, morning report, noon lectures, journal club, FMS case based teaching and medical and surgical grand rounds. Additionally, they participate in Balint training groups and specific Family Medicine and institutional conferences. Completion of a research/scholarly project is required within the 36 months of FM residency training while meeting target progress dates. Residents must demonstrate milestone progress through out each PGY of training.

OTHER DUTIES:

Duties not inclusive of the structured curriculum, under faculty supervision, may consist of other patient care or educational activities assigned to the resident by the program director, faculty or supervising attending if patient well-being or the resident's education is fostered.

RISK CLASSIFICATION:

CATEGORY I: Tasks that involve regular exposure to blood, body fluid, or tissue.

Revised 2/18/16

Exhibit B

EXHIBIT B

Resident/Fellow Code of Professional Standards

The mission of The Guthrie Clinic is to work with the communities we serve to help each person attain optimal, life-long health and well-being. We will do so by providing integrated, clinically-advanced services that prevent, diagnose, and treat disease, within an environment of compassion, learning, and discovery. The following core principles of professional conduct support and serve this mission:

- Practice Respect for Persons
- Maintain Patient Confidentiality
- Maintain Personal Honesty and Integrity
- Assume Responsibility for Patient Care
- Maintain Awareness of Limitations and Opportunities for Improvement and Strive to Improve
- Practice Professional Behaviors
- Assume Responsibility for Self and Peer Behavior
- Respect Property and Laws
- Practice Ethical Behaviors
- Maintain Trust and Integrity in Research

These principles define a Code of Professional Standards which specifies behaviors that all trainees and students are expected to demonstrate. Certain principles have direct application in clinical settings, while others are applicable to teaching, research, or support activities.

All trainees have additional ethical obligations that exceed legal and regulatory requirements by virtue of their professional training and because of their positions of responsibility. Trainees have responsibilities to those whom they serve, their colleagues, and the public.

The Code of Professional Standards is comprised of principles or necessary behaviors that must be demonstrated by all trainees. Failure to meet any of these principles is in violation of the Code of Professional Standards and can result in disciplinary action in accordance with associated Guthrie Policies.

Principles

1. Practice Respect for Persons

- Treat those whom you serve, with whom you work, and the public with the same degree of respect you would wish them to show you.
- Treat patients and colleagues with empathy, kindness, compassion and dignity.
- Include patient preferences for treatment in the plan of care to the fullest extent possible.
- Respect the privacy and modesty of patients.
- Do not use discriminatory, harassing, hostile or profane language, verbally or in writing.
- Do not harass others physically, verbally, psychologically, or sexually.
- Do not discriminate on the basis of gender, religion, race, disability, age, sexual orientation, national origin, or marital status.

2. Maintain Patient Confidentiality

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- Do not share the medical or personal details of a patient with anyone except those health care professional's integrals to the well-being of the patient or within the context of an educational endeavor.
- Do not seek data on patients unless you have a professional "need to know."
- Do not discuss patients or their illnesses in public places where the conversation may be overheard.
- Do not publicly identify patients, verbally or in writing, without documented permission or adequate justification.
- Do not invite or permit unauthorized persons into patient care areas.
- Do not share your confidential computer system passwords with unauthorized persons.

3. Maintain Personal Honesty and Integrity

- Be truthful in verbal and in written communications.
- Acknowledge your errors of omission and commission to colleagues.
- Do not mislead others.
- Do not cheat, steal, plagiarize, or otherwise act dishonestly.
- When using information that is not your own in verbal or written communication or in medical records, give proper attribution, including the sources and date.
- Do not abuse privileges.

4. Assume Responsibility for Patient Care

- Fulfill your professional and work-related responsibilities conscientiously.
- Do not engage in unsupervised involvement in areas or situations where you are not adequately trained unless in an urgent or emergency situation.
- Obtain the patient's informed consent for diagnostic tests or therapies.
- Take responsibility for the patients under your care; when off duty, or on vacation, assure that your patients are adequately cared for by another practitioner.
- Do not abandon a patient. If you are unable or unwilling to continue care, you have an obligation to arrange for alternative care or, if time permits, assist in making a referral to another competent practitioner willing to care for the patient.
- Follow up on ordered laboratory tests and complete patient record documentation conscientiously.
- Do not abuse alcohol or drugs that could diminish the quality of patient care or academic performance.
- Cooperate with other members of the health care team in clinical activities.
- Honestly disclose consequential, unanticipated outcomes to patients or families.

5. Maintain Awareness of Limitations and Opportunities for Improvement and Strive to Improve

- Act in accordance with your authorized role and level of responsibility.
- Be aware of your personal limitations and deficiencies in knowledge and abilities and know when and who to ask for supervision, assistance, or consultation.
- Notify the responsible supervisor if something interferes with your ability to perform clinical or support tasks effectively.
- Know when and for whom to provide appropriate supervision.
- Report system problems that may place patients or others at risk of harm.
- Avoid patient involvement when you are ill, distraught, or overcome with personal problems.

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- Keep abreast of new knowledge and policy changes that may relate to your work.

6. Practice Professional Behaviors

- Identify yourself and your role to patients and staff; wear your name tag and distribute your business card.
- Dress in a neat, clean, manner following local policies that govern accepted attire.
- Maintain a professional composure despite the stresses of fatigue, professional pressures, or personal problems.
- Introduce all students accurately and appropriately, for example, not as "doctor" or "nurse."
- Do not write offensive or judgmental comments in patients' charts.
- If medical or professional decisions of colleagues are questionable, discuss with sensitivity in an appropriate place.
- Avoid the use of first names without permission in addressing adult patients.
- Conduct yourself in a professional manner whenever you are performing your job duties or representing the organization in a job-related capacity.
- Resolve professional disagreements through discussion conducted respectfully.
- Dedicate yourself to lifelong learning and self-improvement by implementing a personal program of continuing education and continuous quality improvement.
- Complete all assignments accurately, thoroughly, legibly, and in a timely manner.
- Students and trainees should attend scheduled classes, laboratories, seminars, and conferences except for justified absences

7. Assume Responsibility for Self and Peer Behavior

- Report breaches of unprofessional behavior to the appropriate person.
- Indicate disapproval or seek appropriate intervention if you observe less serious breaches.
- Seek input and feedback from patients and colleagues on your own professional behavior and use it to improve.
- Learn from experience and knowledge gained from errors in order to avoid repeating them.
- Assure that your physical and mental health render you fit to work.
- Develop a personal life style of dietary habits, recreation, disease prevention, exercise, and outside interests to optimize physical and emotional health and enhance professional performance.

8. Respect Property and Laws

- Adhere to local, state, and federal laws and regulations.
- Do not use computer and telecommunication resources for personal commercial purposes or financial gain or to distribute content that would violate Guthrie policy.
- Do not misappropriate, destroy, damage, or misuse property of Guthrie.
- Conduct business in accordance with all pertinent laws and regulations and applicable institutional policies.

9. Practice Ethical Behaviors in Teaching

- Be knowledgeable about the subject material you are teaching.
- Create and nurture a collegial environment in which students and peers are valued and respected.
- Teach others at all levels of education and training.

Exhibit B

- Be generous with your time to answer questions from peers, patients, and patients' family members.
- Foster student and trainee professional growth, lifelong learning, and ethical behavior.
- Encourage intellectual curiosity and rigor.

10. Maintain Trust and Integrity in Research

- Respect the autonomy and promote the dignity of each human research participant; ensure just treatment of and create protections for those whose autonomous decision making may be diminished or impaired; design research to minimize potential harm and maximize potential benefits for each human participant.
- Obtain consent for participation in research based on providing adequate information for decision-making to each potential participant.
- Protect the integrity of scientific design, data collection, and conclusions.
- Report the results of research honestly in scientific and scholarly presentations and publications, and without exaggeration to the public and the media.
- Attribute proper credit to colleagues and others who contribute to the research when publishing and presenting reports of results. Accept co-authorship attribution only when appropriate.
- Encourage the free sharing and collegial exchange of research results; foster cooperation and collaboration among research team members.

Exhibit B

EXHIBIT C

EFFECTIVE JULY 1, 2018

Annual Stipends

PGY-1	\$55,431
PGY-2	\$59,869
PGY-3	\$62,259
PGY-4	\$64,757
PGY-5	\$68,147
PGY-6	\$72,028

Educational Allowances

Funds are provided for expenses related to the purchase of educational resources, medical society dues, attendance to educational conferences, and travel related to attending an educational conference. The allocation of funds is per program protocol and approved by the Program Director. Funds must be used by the end of each contract year and may not be carried over to the next contract year. The amount of \$1,000 is allotted to PGY-1 residents; and \$2,000 is available for all PGY-2 thru PGY-6 residents and fellows.

Housing, Meals, Relocation Allowance and Uniforms

- A. Residents and fellows are expected to make their own arrangements for housing.
- C. Meals are available at the Robert Packer Hospital cafeteria and vending machines while on call duty.
- D. Each resident and fellow is supplied with three white lab coats annually. Hospital-issued and laundered scrubs are available to all residents and fellows while performing procedures. A policy specific to wearing scrubs is outlined in the House Staff Manual and posted on-line.
- E. Upon entering a Guthrie/Robert Packer Hospital training program, all residents, fellows and interns receive a relocation allowance, which is included in their first paychecks. The amounts of the relocation allowances are as follows:

Categorical PGY-1 residents	\$5000
Preliminary PGY-1 residents	\$2000
Rotating osteopathic interns	\$2000
PGY-2 and above	\$ 750

If preliminary surgery residents and rotating osteopathic interns choose to continue their education at Guthrie following the preliminary/internship year, an additional \$3000 will be paid at the beginning of the PGY-2 year, for a total of \$5000

TIME AWAY

Personal

PGY-1 residents receive 15 working days of paid time off (PTO); PGY-2 and above receive 20 working days of PTO per academic year.

All time away is scheduled per program protocol and approved by the Program Director. Time away must be scheduled, so as not to bump patients within 30 days of their appointments. All PTO must be used by the end of each contract year and may not be carried over to the next contract year.

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Educational – Educational leave may be granted up to 5 working days per academic year for conference and meeting attendance. All educational leave must be scheduled per program protocol and approved by the Program Director. Education leave and funds must be used by the end of each contract year and may not be carried over to the next contract year.

Incidental Leave - Leave is available for short- and long-term disability, family and medical leave, bereavement (funeral Leave – refer to RPH policy for number of days allowed. To meet ACGME/RRC requirements, a resident may have to extend the post-graduate year in which leave is taken.

1. Funeral Leave – In the event of the death of the resident's spouse, father, mother, sibling or child, up to three consecutive days will be granted with pay. Funeral time may not be used if the resident is already using paid time off, or is not scheduled to work during the time of the funeral. In the case of the death of other relatives or the immediate family of a spouse, one day off with pay will be granted.
2. Short-Term Disability – If time away is required due to medical necessity, unused Time Away will be used and then the employee would enter the Short Term Disability Plan. If additional time off is required, it is granted without pay, subject to the Family and Medical Leave Act of 1993.
3. Family and Medical Leave – In accordance with the requirements of the 1993 Family and Medical Leave Act, eligible residents have the right to take a total of 12 weeks of unpaid leave during a 12-month period for certain family or personal health care needs. In accordance with the Family and Medical Leave Policy, eligibility is based on employment by the Hospital for at least one year prior to the request. However, any resident who has been employed for less than one year may request medical leave, subject to approval. Whenever possible, residents should give 30 days' advance notice of their need for leave. Leave may be taken for the following purposes:
 - a. birth of a child or placement of an adopted or foster child;
 - b. provide care for a spouse, parent or child who now has a serious health condition as described by the law; or
 - c. care of oneself because of a serious health condition that prevents the resident from performing the essential functions of the job.

Counseling Services

As an employee of Robert Packer Hospital, a resident or fellow is entitled to confidential and free counseling services via the Employee Assistance Program and as explained in the Housestaff Agreement.

Exhibit B

EXHIBIT D
ROBERT PACKER HOSPITAL
BENEFITS FOR RESIDENTS

Medical Insurance One medical insurance plan, **Guthrie Network Advantage**, is available to meet residents' needs. It is available in either individual or family plans. The cost for the insurance is paid by Robert Packer Hospital (RPH).

Dental Insurance A comprehensive dental plan is offered to residents. Diagnostic/Preventive, Basic and Major Restorative, and Orthodontic services are covered under the high option plan; the low option plan covers only Diagnostic/Preventive and Basic Restorative services. A summary sheet and booklet outlining coverage is available from Human Resources.

High Option Plan:

Individual Coverage	Paid by RPH
Employee + 1 Coverage	\$12.57/pay
Family Coverage	\$25.12/pay

Low Option Plan:

Individual Coverage	Paid by RPH
Employee + 1 Coverage	\$7.76/pay
Family Coverage	\$15.50/pay

Life Insurance \$50,000 term life insurance, with an accidental death and dismemberment rider, is provided at no cost to the resident.

Employees may elect to purchase term life insurance for their spouse in increments between \$25,000 and \$250,000 but may not exceed the amount of life insurance coverage of the employee. All requests for spousal life insurance must include the completed **Evidence of Insurability Form**. Coverage is dependent on approval from the Life Insurance Carrier.

Child Life insurance coverage is also available as follows:

\$5,000 coverage	\$.46 per pay
\$10,000 coverage	\$.92 per pay

This is the cost per pay regardless of the number of children you are insuring.

If both spouses are employed by RPH, they may not cover each other, and only one spouse may cover any children.

Flexible Spending Accounts This option allows residents to set up spending accounts for unreimbursed health care and dependent care costs with pre-tax dollars, thus provided more spendable income.

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Participants in the health care flexible spending account receive a debit card to utilize for expenses, eliminating the need to file claims via paper.

Short Term Disability

To provide income continuance in the event of short term disability, this benefit, paid for by RPH, begins on the 5th consecutive day of disability and continues through 26 weeks (6 months). 75% salary reimbursement is received for the first 4 weeks; 50% is received for the remaining weeks of disability.

Long Term Disability

The benefit takes effect after 26 weeks of short term disability. Provides 60% salary reimbursement until age 65-70 (depending on age when disability begins.)

Retirement Plan

The Guthrie Retirement Savings Plan is managed by Fidelity and has two components. The first provides an employer match to the voluntary contributions you make to the plan. The second provides an additional, automatic employer contribution based on your age. The plan works as follows:

- Guthrie will match 50% of the contribution that you make into a 403(b) Fidelity plan (up to a maximum employer contribution of 3% of your salary). This means if you contribute 6% of your salary to the plan, Guthrie will contribute 3% to the plan; if you contribute 5% of your salary to the plan, Guthrie will contribute 2.5%, etc.
- Additionally, Guthrie will automatically contribute to your 403(b) plan, using an age-based formula. Employees age 60 and older will receive a 3.5% contribution; those over age 50 will receive a 3% contribution, etc.
- Employees who do not make contributions to the new plan will be automatically enrolled at a deferral rate of 3% of their salary (which will receive an employer match of 1.5%). This deferral will increase by 1% on an annual basis, to a maximum of 6%. Employees may opt out of the deferral contribution at any time and receive only the automatic age-based contribution.
- **This means, for example: Employees age 60 or older who contribute 6% of their salary into the new plan will see a Guthrie contribution of 6.5% (employer match of 3% plus age-based employer contribution of 3.5%), resulting in a total COMBINED contribution of 12.5% by you and Guthrie.**

Exhibit B

Certification MC-FP Exam

Candidates seeking certification must meet the eligibility criteria specified by the American Board of Family Medicine (ABFM). All primary exams administered by the ABFM are referred to as the "Family Medicine Certification Examination" regardless of whether a physician is certifying for the first time or continuously certifying after having been previously certified. The examination for residents seeking initial certification is administered in April and November.

For those physicians who started family medicine residency training prior to June 1, 2012, the following must be obtained to become certificated:

1. Successful performance on the Family Medicine Certification Examination
2. The Program Director verifies that the resident has successfully met all of the ACGME program requirements
3. The candidate obtains an active, valid, full, and unrestricted license to practice medicine in any state or territory of the United States or any province of Canada

The ABFM requires residents who entered family medicine residency training on or after June 1, 2012 (including those who received advanced placement credit for prior training in another specialty, including osteopathic training), to complete the Resident Certification Entry Process. In order to become certified by the ABFM, the following requirements must be met:

- Completion of 50 Family Medicine Certification points which includes:
 - Minimum of one (1) Knowledge Self-Assessment (KSA) activity (10 points each)
 - Minimum of one (1) Performance Improvement (PI) activity with data from a patient population (20 points each)
 - Additional approved KSA Knowledge Self-Assessment, Clinical Self-Assessment (CSA 5 points each), or Performance Improvement activities to reach a minimum of 50 points.
- Application and full examination fee for the Family Medicine Certification Examination
- Attainment of an active, valid, full, and unrestricted license to practice medicine in any state or territory of the United States or any province of Canada and be in continuous compliance with the ABFM Guidelines for Professionalism, Licensure, and Personal Conduct
- Successful completion of family medicine residency training and verification by the program
- Successful completion of the Family Medicine Certification Examination

Knowledge Self-Assessment

The Knowledge Self-Assessment (KSA) is an assessment of the physician's knowledge in a particular domain. Each domain consists of core competencies that the physician must master. In order to successfully complete the assessment, eighty percent (80%) of the questions in each competency must be answered correctly. If the physician is not successful initially, the activity moves to a review mode, in which a critique and references for each incorrectly answered question can be reviewed before entering new answers to the missed questions.

In order to satisfy the minimum requirement of one Knowledge Self-Assessment (KSA) activity, residents MUST complete one of the activities listed below:

- Asthma KSA
- Care of the Vulnerable Elderly KSA
- Cerebrovascular Disease KSA

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- Childhood Illness KSA
- Coronary Artery Disease KSA
- Depression KSA
- Diabetes KSA
- Health Behavior KSA
- Heart Failure KSA
- Hospital Medicine KSA
- Hypertension KSA
- Maternity Care KSA
- Mental Health in the Community KSA
- Pain Management KSA
- Preventive Care KSA
- Well Child Care KSA

Performance Improvement

ABFM-developed Performance Improvement (PI) activities are web-based, quality improvement activities in health areas that generally correspond to the Knowledge Self-Assessment (KSA) activities.

Each physician will assess his or her care of patients using evidence-based quality indicators. After a physician enters data from 10 patients into the ABFM website, feedback is provided for each of the quality indicators. The performance data is used by the physician to choose an indicator for which a quality improvement plan will be designed. Using a menu of interventions available from various online sources, the physician designs a plan of improvement, submits the plan, and implements the plan in practice. After a minimum of 1 week, the physician again assesses the care provided to 10 patients in the chosen health area and enters the data into the ABFM website. The physician then is able to compare pre- and post-intervention performance, and compare their results to those of their peers. Evidence of improvement is not required to satisfy this requirement.

In order to satisfy the minimum Performance Improvement activity requirement, residents **MUST** complete one Performance Improvement activity using data from a patient population. Examples of Performance Improvement activities accepted by the ABFM include:

- Asthma PI activity
- Comprehensive PI activity
- Coronary Disease PI activity
- Depression PI activity
- Diabetes PI activity
- Hand Hygiene PI activity

Exhibit B

- Heart Failure PI activity
- Hypertension PI activity
- Self-Directed Quality Improvement Efforts
- AAFP Metric

[Click here to view a list of external approved alternate PI activities.](#)

There are no fees charged by the ABFM for completing ABFM-developed KSA, CSA, and PI activities during the Resident Certification Entry process. However, residents who complete approved alternate PI activities may be required to pay a participation fee to the external sponsor of that activity.

Alternative Self-Assessment & Performance Improvement Activities Available

Residents may complete of the alternative activities listed below to count toward the overall 50-point requirement. However, these activities do not count toward the minimum required KSA activity and PI activity with patient population data.

Clinical Self-Assessment Activities

The Clinical Self-Assessment (CSA) presents patient care scenarios corresponding to the topic chosen in the Knowledge Self-Assessment (KSA). Simulated patients evolve in response to therapeutic interventions, investigations, and the passage of time, providing an opportunity for residents to demonstrate proficiency in patient management skills.

Alternative Self-Assessment Activities

- Patient Centered Medical Home (10 points)
- Health Literacy Module (10 points)

Alternative Performance Improvement Activities

- Hand Hygiene PI Activity (20 points)

Methods in Medicine Modules

- Cultural Competency MIMM (20 points)

When applying for the certification examination, a resident may begin the application process and submit payment for the examination without having all the Knowledge Self-Assessment (KSA) and Performance Improvement (PI) activity requirements completed. In order to avoid late application filing fees, it is recommended that physicians start the application early. However, in order to be approved to take the examination and select a test center date and location, all 50 certification activity points and the minimum Knowledge Self-Assessment (KSA) and Performance Improvement (PI) Activity requirements must be complete.

Residents will be able to complete the above requirements for the Resident Certification Entry Process during their residency training years and up to three calendar years after completion of training. If a resident does not fulfill the requirements within the three calendar years following training completion, he/she will have to go through the ABFM Entry process, which includes the above requirements plus CME and process fees to gain eligibility to sit for the certification examination. Any activities started or completed during the Resident Certification Entry process will not count toward the ABFM Entry process.

Eligibility Requirements for Initial Certification

All candidates for the ABFM Certification Examination for initial certification must have satisfactorily completed three years of training (a full 36 calendar months with 12 months in each of the G-1, G-2, and G-3 years) in a Family Medicine residency program accredited by the Accreditation Council for Graduate Medical Education (ACGME) subsequent to

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receipt of the M.D. or D.O. degree from an accredited institution and, when applicable, a Fifth Pathway Year, or receipt of a Standard Certificate from the Educational Commission for Foreign Medical Graduates (ECFMG), or compliance with other ACGME requirements for entry into graduate medical training in the United States. If a physician does not meet the eligibility requirements of the ACGME for residency training in Family Medicine, his/her training will not be recognized by the Board.

Candidates who obtained their M.D. degree from medical schools in the United States or Canada must have attended a school accredited by the Liaison Committee on Medical Education or the Committee for Accreditation of Canadian Medical Schools. Candidates who obtained a D.O. degree must have graduated from a college of osteopathic medicine accredited by the American Osteopathic Association.

All applicants for the Family Medicine Certification Examination are subject to the approval of the Board, and the final decision regarding any application rests solely with the ABFM. No candidate will be allowed to take the examination until all fees are paid and all requirements have been satisfactorily met.

Satisfactory Completion of Residency

The Board prefers all three years of postgraduate training to be in the same ACGME-accredited Family Medicine program; however, other training may be considered as equivalent (e.g., Flexible/Transitional Year, AOA Osteopathic Internship, etc.). In these cases, the ABFM requires residency programs to notify the Board of residents who are entering training with Advanced Placement credit via the Resident Training Management (RTM) System. If the Program Director fails to comply, the Board will determine the amount of transfer credit at the time of its discovery of the transfer. Consequently, the resident may receive less credit toward certification than anticipated and may be required to extend the duration of training.

The last two years of Family Medicine residency training must be completed in the same accredited program. Transfers after the beginning of the G-2 year are approved only in extraordinary circumstances.

All candidates' education and training experiences are subject to review and approval by the ABFM.

Deadline for Completion of Training—Residents who are expected to complete training by June 30 are automatically provided the application link for the April examination. Residents who are expected to complete training between July 1 and October 31 may be declared eligible to apply for the April examination based on a recommendation from their residency program director. Residents who are expected to complete training between November 1 and December 31 will be permitted to apply for the November exam. Residents who are expected to complete training between January 1 and April 30 may be declared eligible to apply for the November examination based on a recommendation from their residency program director.

Final Verification—Verification of satisfactory completion of residency training is submitted through the Resident Training Management (RTM) system by the Family Medicine Residency Program Director. Program Directors may access the RTM system up to 15 days before the anticipated completion date of the resident to verify satisfactory completion of residency training. Candidates for the Certification Examination will not receive certification until the Program Director has verified this information (pending all other certification requirements have been met). The effective date of certification will be the date on which the physician has met all certification requirements.

Certification will be awarded when all of the criteria are met:

1. Successful performance on the Family Medicine Certification Examination
2. The Program Director verifies that the resident has successfully met all of the ACGME program requirements
3. The candidate obtains an active, valid, full, and unrestricted license to practice medicine in any state or territory of the United States or any province of Canada

Continuing Medical Education

Candidates who apply for the Certification Examination within three years of completion of an ACGME-accredited Family Medicine Residency are not required to document any continuing medical education (CME). Candidates who apply after the 3-year period will be required to complete the Entry Process, which requires 150 hours of acceptable CME in the last 3 years. Additional information regarding the Entry Process is located below.

Licensure Requirements

To obtain and maintain certification, all candidates and Diplomates must hold an active, valid, full, and unrestricted license

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to practice medicine in any state or territory of the United States or any province of Canada and be in continuous compliance with the ABFM Guidelines for Professionalism, Licensure, and Personal Conduct [PDF].

The ABFM will monitor the issue/renewal and expiration dates of license information entered through the Physician Portfolio and will issue email reminders of upcoming expirations. Please note that the ABFM does not currently receive licensure data, other than Disciplinary Action Reports, directly from any other source than the Diplomate. Consequently, it is your responsibility to maintain current license information with the ABFM. Failure to maintain an active and unrestricted license and/or the failure to maintain that information in your Physician Portfolio with the ABFM will result in the loss of your certification status.

Please note: Candidates may begin an application and sit for the examination while in the process of securing a permanent medical license; however, in order to gain certification a permanent license must be obtained and the candidate must be compliant with the ABFM Guidelines for Professionalism, Licensure, and Personal Conduct (presuming all other certification requirements have been met).

Permanent license information must be submitted through the Physician Portfolio on the ABFM website. The effective date of certification will be the date on which the candidate meets all certification requirements.

Institutional, temporary, and training medical licenses are not acceptable and should not be entered in the Physician Portfolio. If a candidate uses an institutional, temporary, or training medical license, or enters an inaccurate date of initial licensure or renewal, in order to complete the requirements for certification and the ABFM determines that the information does not match the records from the licensing state or if the license does not meet the ABFM Guidelines for Professionalism, Licensure, and Personal Conduct, the certification will be invalidated. The candidate will be notified subsequent to this action. Falsification of any information entered in the application and/or the Physician Portfolio is a serious violation of ABFM policies and can result in withdrawal of certification for an extended period of time.

When updating or adding a new license record, applicants are required to attest that the license is current, valid, unrestricted, and permanent. If the medical license does not meet the ABFM Guidelines for Professionalism, Licensure, and Personal Conduct, the candidate must contact the ABFM License Coordinator.

It is the responsibility of the physician to inform the ABFM in writing, by letter, email, or notification through the medical license page in the application or the Physician Portfolio, immediately following any action by a licensing authority. Should a physician be uncertain about whether or not they are meeting the ABFM Guidelines for Professionalism, Licensure, and Personal Conduct, a written inquiry should be made to the Board immediately.

Any candidate sitting for an examination while under an action by a licensing authority that places him/her in violation of the ABFM Guidelines for Professionalism, Licensure, and Personal Conduct will have their examination invalidated and the examination fee will be forfeited. Eligibility for examination will not be reinstated until the physician is in full compliance with the guidelines. If any action by a licensing authority is taken after this application is filed, but prior to the examination, it is still the responsibility of the applicant to report the action to the ABFM prior to examination for review. If a candidate is appealing a decision relative to their certification status to the Credentials Committee, they are permitted to sit for the examination with the understanding that if the appeal is unsuccessful, their examination will be invalidated and the examination fee will be forfeited.

Certification Entry Process

Any physician who does not successfully pass the Family Medicine Certification examination within three calendar years following the year in which residency training is completed will be required to satisfy the Certification Entry Process in order to be eligible for the exam and gain certification status.

The Certification Entry Process includes:

- Completion of 50 points which includes:
 - Minimum of one (1) Knowledge Self-Assessment (KSA) activity (10 points each)
 - Minimum of one (1) Performance Improvement (PI) activity (or an approved alternative; 20 points each)
 - Additional approved KSA, Clinical Self-Assessment (CSA; 5 points each), or PI activities

Exhibit B

- Completion of one hundred fifty (150) credits of acceptable CME (minimum 50% Division I), acquired in last three (3) years
- Compliance with ABFM Guidelines for Professionalism, Licensure, and Personal Conduct which includes holding an active, valid, full and unrestricted license to practice medicine in any state or territory of the United States or any province of Canada
- Submission of Entry Process Fee
- Submission of application and accompanying full examination fee for the Family Medicine Certification Examination
- Successful completion of the Family Medicine Certification Examination
- The Entry process must be completed no later than 3 calendar years following the year the process is started. If the process is not completed in the established timeframe, a new cycle of the Certification Entry Process will be required in order to gain certification. Any activities completed prior to starting the Certification Entry Process (and the associated fees) will not carry forward. Any incomplete activities started prior to the Certification Entry Process will be reset so they may be started anew, and unused fees will be refunded.

Exhibit C

From: DiBlasi, Claudia
Sent: Wednesday, April 15, 2020 4:40:12 PM
To: Phykitt, Donald
Subject: Re: confidential

Nothing at the moment. Thank you.

Kind regards,
Claudia
Claudia R DiBlasi, DO
PGY-1 Family Medicine

From: Phykitt, Donald <Donald.Phykitt@guthrie.org>
Sent: Tuesday, April 14, 2020 8:29 AM
To: DiBlasi, Claudia <Claudia.DiBlasi@guthrie.org>
Subject: Re: confidential

Thanks for the update Dia. Have they recommended or do you feel that you need any accommodations?

Donald E Phykitt, DO
Program Director, Family Medicine Residency
Medical Director, Guthrie Sports Medicine
Director of Osteopathic Medical Education
Guthrie Clinic/Robert Packer Hospital
570-887-3335
570-887-2807 (FAX)
phykitt_donald@guthrie.org
From: DiBlasi, Claudia <Claudia.DiBlasi@guthrie.org>
Sent: Tuesday, April 14, 2020 8:20 AM
To: Phykitt, Donald <Donald.Phykitt@guthrie.org>
Subject: Fw: confidential

Dr Phykitt,
I have ADD but have not provided any documentation to the program thus far because I have not requested an accommodation. I recently informed the GME of this diagnosis and provided them with documentation of the diagnosis. I am forwarding the email I sent to Kierstin to you just so you are aware of this.

Best regards,
Dia
From: DiBlasi, Claudia
Sent: Saturday, April 11, 2020 10:23 PM
To: Gardner, Kierstin <Kierstin.Gardner@guthrie.org>
Subject: confidential

Hello, Kiersten.

Exhibit C

I have ADD but did not provided the GME office with documentation when I started to work here because at that time I did not have a desire to request any accommodations. However, I think the program or GME office should know about this and have it documented in case I request some testing or other accommodations in the future. I attached a continuity of care document from my former PCP that shows a diagnosis of ADD.

Best regards,

Dia

Exhibit D

From: Gillan, Michael
Sent: Friday, January 22, 2021 10:25:51 AM
To: Schamel, Emily;Corey, Mark;Clancy, Zonia;DiBlasi, Claudia
Subject: RE: Block 10 Elective Request

Yes.

From: Schamel, Emily <Emily.Schamel@guthrie.org>
Sent: Friday, January 22, 2021 10:25 AM
To: Gillan, Michael <MichaelF.Gillan@guthrie.org>; Corey, Mark <Mark.Corey@guthrie.org>; Clancy, Zonia <Zonia.Clancy@guthrie.org>; DiBlasi, Claudia <Claudia.DiBlasi@guthrie.org>
Subject: RE: Block 10 Elective Request

Currently, they are frozen. Should they be fully cancelled?

From: Gillan, Michael <MichaelF.Gillan@guthrie.org>
Sent: Friday, January 22, 2021 10:24 AM
To: Schamel, Emily <Emily.Schamel@guthrie.org>; Corey, Mark <Mark.Corey@guthrie.org>; Clancy, Zonia <Zonia.Clancy@guthrie.org>; DiBlasi, Claudia <Claudia.DiBlasi@guthrie.org>
Subject: RE: Block 10 Elective Request

I believe that was already done...Can you please confirm that with Sue.

Michael Gillan, DO
Program Director, Family Medicine Residency
Guthrie Clinic/Robert Packer Hospital

From: Schamel, Emily <Emily.Schamel@guthrie.org>
Sent: Friday, January 22, 2021 10:16 AM
To: Corey, Mark <Mark.Corey@guthrie.org>; Clancy, Zonia <Zonia.Clancy@guthrie.org>; DiBlasi, Claudia <Claudia.DiBlasi@guthrie.org>
Cc: Gillan, Michael <MichaelF.Gillan@guthrie.org>
Subject: RE: Block 10 Elective Request

Dr. Brown approved the additional days (Tuesday-Thursday) for time spent with Anesthesiology. Do we need to make contact with the clinic staff to cancel those clinics from 2/1-2/28?

From: Corey, Mark <Mark.Corey@guthrie.org>
Sent: Friday, January 15, 2021 10:19 AM
To: Clancy, Zonia <Zonia.Clancy@guthrie.org>; DiBlasi, Claudia <Claudia.DiBlasi@guthrie.org>
Cc: Schamel, Emily <Emily.Schamel@guthrie.org>; Gillan, Michael <MichaelF.Gillan@guthrie.org>
Subject: RE: Block 10 Elective Request

Hi,
I spoke with Dr. Dibiasi today.
She indicated this elective is very important to her and want to maximize her time in Anesthesia. I spoke to Dr. Gillan who approved in concept cancelling her Tuesday clinics and excuse her from Thursday didactics for the block. This would allow her full days on Tuesday and Thursday. I would ask that the residency see if they can accommodate her on these days.

I spoke to Sandra who is going to freeze the Tuesday clinics. 2 patients will need to be moved ultimately. Dr. Gillan expressed that Dr. Dibiasi may need to find time elsewhere to make up the clinic encounters.

Thank you for your assistance.

Mark Corey

Exhibit D

From: Clancy, Zonia <Zonia.Clancy@guthrie.org>
Sent: Wednesday, January 13, 2021 11:11 AM
To: DiBlasi, Claudia <Claudia.DiBlasi@guthrie.org>
Cc: Schamel, Emily <Emily.Schamel@guthrie.org>; Corey, Mark <Mark.Corey@guthrie.org>
Subject: Block 10 Elective Request

Hi Dr. DiBlasi,

I received your elective request for Block 10, that you were interested in working with Dr. Brown on Anesthesia.

When I reached out to him to discuss scheduling your time he indicated that you could only be present in Anesthesia for the full days on Wednesdays, that he finds the learning on half days to be insufficient. As a result that leaves you with 3 half day sessions each week that we'll need to fill with an alternative elective assignment. I reached out to Dr. Corey to see if anything else had been discussed as your form only covered anesthesia. For future elective requests, it can often be helpful to discuss your schedule with your proposed elective supervisor when meeting with them. Schedule templates like the one included below are available on Amion or you can always ask Emily or I to help out.

You will need to determine what you'd like to do for those half day sessions, discuss with Dr. Corey and secondary elective supervisor. We will need an additional elective request form filled out, signed and submitted asap. I've attached a copy of the request form where you're in Albany. Since you won't be able to get physical signatures, forwarding a copy of confirmation emails will suffice.

31 Su	1 February	2 Tu	3 We	4 Th	5 Fr	6 Sa
Inpatient Pediatrics	Elective 2 Clinic ↑	Elective 2 Clinic ↑	Elective 2 ANES	Elective 2 Didactics ↓	Elective 2 Same Day Clinic ↑ Clinic ↓	Elective 2
7 February	8 Mo	9 Tu	10 We	11 Th	12 Fr	13 Sa
Elective 2	Elective 2 Clinic ↑	Elective 2 Video Clinic ↑	Elective 2 ANES	Elective 2 Didactics ↓	Elective 2 Same Day Clinic ↑ Clinic ↓	Elective 2 WeekEnd Night Call (Senior) ☺
14 Su	15 Mo	16 Tu	17 We	18 Th	19 Fr	20 Sa
Elective 2 WeekEnd Night Call (Senior) ☺	Elective 2 POST CALL	Elective 2 Clinic ↑	Elective 2 ANES	Elective 2 Didactics ↓	Elective 2 Same Day Clinic ↑ Clinic ↓	Elective 2
21 Su	22 Mo	23 Tu	24 We	25 Th	26 Fr	27 Sa
Elective 2	Away ☺	Away	Away	Away	Away	Elective 2

Thanks,

Zonia Clancy, BSc

Program Coordinator – Family Medicine Residency

Program Compliance and Strategic Support (for Program Operations and Scheduling please include Emily Schamel)

I am currently working remotely due to the Covid-19 pandemic. Please contact me via phone or text at 607-333-8418.

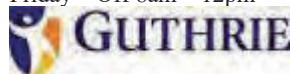
Guthrie Robert Packer Hospital
One Guthrie Square

Exhibit D

Sayre, PA 18840
(570) 887- 3381 (Office)
(607) 333-8418 (Mobile)
(570) 887-2807 (Fax)

Zonia's Office Hours: Emily's Office Hours:

Monday – 8am-3pm 11am – 5pm
Tuesday – 8am-12pm 4pm – 6pm
Wednesday – 8am-12pm 4pm – 6pm
Thursday – 8am-12pm 12pm – 6pm
Friday – Off 8am – 12pm



Charge No. 17F-2022-61071 - DiBlasi v. Guthrie Healthcare System

Response Provided by Claudia R DiBlasi on December 5, 2022

I had a career prior to going to medical school. What I learned from my work experience is that the culture of an organization is set by the organization's leadership. I was treated with disrespect from Dr. Donald Phykitt and Dr. Michael Gillan repeatedly, and this was reflected in the way the other residents treated me. I am going to report events that were harmful to my education as a resident, damaging to me personally, detrimental to my career, undermined my authority as a senior resident, and demonstrated that the residency inculcated a culture of bullying and harassment.

PGY-1

Orientation, June 2019

During orientation we trained for ACLS certification. This required running two mock scenarios / codes on mannequins. During one of my scenarios, we needed to shock the patient. In my medical school we were taught that when leading a code and preparing to shock a patient, after calling, "clear", we needed to see the palms of everyone's hands who was working on the patient before hitting the button and delivering the shock. This is done to maintain the safety of the medical team. I explained to the team what I had learned in medical school and told them that I would be looking for the palms of their hands prior to delivering a shock. When I called, "clear," prior to shocking the mannequin, not one person on the team showed me the palms of their hands. I reminded them to show me the palms of their hands when I called, "clear," but nobody did. This happened repeatedly throughout the scenario. The other residents were all aged in their 20's or possibly around 30 years old.

PGY-1

Comments About Learning at My Age, 2019 / 2020

During conversations about clinical issues, Dr. Rosita Sabet-Rasekh stated to me on two separate occasions that, "It is difficult to learn after a certain age."

PGY-1

Blocked from Transferring into Anesthesiology Residency

This item was addressed in prior correspondence with EEOC/PHRC.

PGY-2

Maternal Child Rotation Evaluation by Non-Senior Resident

Dr. Donald Phykitt asked Dr. Michael Gergel, a PGY-2 resident, to spend time with me in the Maternal Child rotation and evaluate my performance. Dr. Michael Gergel was not my senior and should not have been asked to evaluate someone at the same training level.

PGY-2

Maternal Child Rotation, Dr. Gagnon, Insubordination / Disrespect for Seniority

During my PGY-2 year, second year residents were required to rotate in the maternal child area twice. After my first rotation, Dr. Donald Phykitt followed up with me and told me that I was not supervising the junior residents well enough. He told me that I had to be in the same room with them whenever they performed a procedure and he instructed me to be with them side-by-side throughout the rotation.

During my second Maternal Child rotation that year, I worked with Dr. Danielle Gagnon, an intern (PGY-1). I instructed her verbally face-to-face on two occasions at the beginning of the rotation not to go into patient rooms without me. Unbeknownst to me, she began rounding on patients by herself. When I learned of this, I reminded Dr. Gagnon that she was not to see patients by herself, and she stated to me that she was able to do so earlier with Dr. Miranda Beeman so she should be allowed to do so now.

I was then admonished by Dr. Donald Phykitt a second time, with his telling me that I needed to give more freedom to the interns. I reminded him that he had told me that the interns needed to be accompanied into patient rooms. I also explained to him that I had not worked with Dr. Gagnon before, I had not observed her myself, and had not yet had an opportunity to assess her capabilities. Nonetheless, he stated that I was supervising the interns too closely. I then reminded Dr. Donald Phykitt that I was the senior resident, and if Dr. Gagnon disagreed with me, she needed to address it with me and she still was required to follow my instructions even if she disagreed with them. He dismissed my concerns about her not following explicit instructions from her senior.

During my PGY-3 year when taking shifts on Maternal Child, I was reminded by the chiefs that seniors are required to accompany the interns when they enter a patient room.

PGY-1/2

ADD and Neuropsych Evaluation, April 2020 - August 2020

This item was addressed in prior correspondence with EEOC/PHRC. I would like to add that I was diagnosed with ADD by Dr. Thandar A. Win of Catskill Regional Medical Center in 2017. I was treated with atomoxetine.

PGY-2 year

Albany Medical Center, Newborn Encounters, and Depression

Residents in the Family Medicine Residency at Robert Packer Hospital were expected to rotate for 4 weeks at Albany Medical Center in an inpatient pediatrics rotation. This is because there are not enough inpatient pediatric patients at Robert Packer Hospital in order to meet

graduation requirements as set forth by the ACGME. I completed a 4-week rotation at Albany Medical Center in January 2021.

The week that I was supposed to start my rotation at Albany Medical Center, I missed 2 days because I was sick. Then I started rotating at AMC; however, I was told that I was not allowed to return and missed 3 additional days because my residency had not provided required documentation to Albany Medical Center that showed I was eligible to work in New York. I facilitated providing the necessary documentation to Albany Medical Center, and then I was allowed to return to work at Albany Medical Center and I completed my rotation.

After I returned to Robert Packer Hospital, Dr. Michael Gillan and Dr. Michelle Nanda told me that I had to go back to Albany for a second pediatrics inpatient rotation. The residency said I needed the inpatient pediatric numbers and they wanted me to make up one missed week, but because Albany Medical Center will not accommodate one-week rotations but would accommodate two-week rotations, I would be required to return for two weeks. I learned from Albany Medical Center that they had requested the documentation clearing me to work in New York from my residency three times and received no response. My program held me responsible for the lack of documentation and said that I did not go to Employee Health for a necessary evaluation. I went to Employee Health multiple times and was told by Employee Health that I had completed everything that I needed to do.

I objected to returning to Albany Medical Center, and I told them it was because I found the experience to be very depressing and I did not want to experience an exacerbation of my depression by returning there. Dr. Michael Gillan's response was to ask me what about the rotation made me depressed. I do not believe that this was an appropriate response. Neither Dr. Michael Gillan nor Dr. Michelle Nanda was my healthcare provider and I did not need to disclose to him any further details. I responded nonetheless and told him that I could not pinpoint any particular thing, but that it was not a good environment for me and it would be damaging for me to return there. Dr. Michelle Nanda then countered by stating that I did not have enough pediatric inpatient numbers to graduate and that they were going to send me back. I attempted on numerous occasions to reconvene with Dr. Michael Gillan and Dr. Michelle Nanda to discuss this, but they refused to meet with me again. After they refused to meet with me again or to discuss this, I filed a grievance. I discussed filing a grievance with my advisor at the time, Dr. Mark Corey. I argued that I would have enough opportunity during my PGY-3 year to meet the inpatient pediatric numbers without going to Albany Medical Center. The hearing committee ultimately decided that I had to return to Albany Medical Center to do an additional two weeks of inpatient pediatric rotation.

In addition, about halfway through PGY-2 year, the residency decided not to count certain healthy newborn encounters towards graduation requirements. I objected to this, and told them I did not think it was acceptable to change the rules halfway through the program. They decided not only to change which encounters would be used to fulfill graduation requirements going forward, they decided to cancel out encounters that were already counted toward graduation requirements.

I filed the grievance regarding two issues: canceling out newborn encounters that had already counted towards graduation requirements, and requiring me to return to Albany. The result was that the hearing panel required me to return to Albany for two weeks, but they did not cancel out healthy newborn encounters that had already been counted towards graduation requirements. They stopped counting healthy newborn encounters going forward.

PGY-2

FMS with Dr. Miranda Beeman, Biopsy, Seniority

During my FMS rotation with Dr. Miranda Beeman, I received a result from my own mammogram suggesting that I had a cancerous growth in one of my breasts. I was scheduled for a biopsy immediately. I needed to take a few days off from the rotation for the biopsy. Typically during a service rotation, residents are not allowed to take any time off. I did not want to disclose my personal medical issues with her, and I did not want to postpone the biopsy until I was on a non-service rotation. I discussed this with Dr. Donald Phykitt because I needed approval from him to take time off and I wanted to maintain my privacy. Dr. Miranda Beeman became very upset that I spoke with him instead of with her.

She told me that I was out of line going directly to the program director instead of speaking with her first. I told her that this was an issue of a private nature, that I understood that for patient care issues I should speak with her first, but this was an unusual situation and I would have needed approval from him to take time off anyway.

For the rest of the rotation, Dr. Miranda Beeman repeatedly was angry with me, told me that she was trying to help me (I am not sure with what), and that I was not receptive to her help and was causing problems.

In addition, I routinely would sit in a room by myself to work on my notes and tasks. I think this was offensive to Dr. Miranda Beeman because Dr. Michael Gillan brought this up to me. At this time, masking was a requirement for all hospital personnel when on hospital premises, including in our offices. I told Dr. Michael Gillan that Dr. Miranda Beeman does not wear a mask when in the office spaces of the residency and that I worked alone so that I would not be around unmasked people. It was also helpful for me to be alone to minimize interruptions due to my ADD.

It was also during this rotation that, after asking questions to Dr. Miranda Beeman about patient care, she would tell me to ask Dr. Michael Gillan. After this occurred multiple times, I started asking Dr. Michael Gillan my questions without posing them to Dr. Miranda Beeman first. Dr. Michael Gillan told me that I was required to address all questions to my senior first, and that only after discussing them with my senior could I then go to an attending if there were still outstanding questions.

In a future FMS rotation, one in which I was the senior resident and Dr. Michael Gillan was the attending, my junior kept asking him questions without discussing patient care issues with me first. When I mentioned this to Dr. Michael Gillan, he stated that it was perfectly all right for junior residents to bypass me and discuss patient care issues directly with him even when I was the senior resident supervising the junior resident.

PGY-2

ICU rotation, Banned from 7th floor ICU / Hit by Nurse, October/November 2020

During my PGY-2 year, during my ICU rotation, one of the ICU nurses hit my hand when I was by a patient's bed. I believe I was pointing to the monitor of a respirator. The nurse did not want me to touch it. Shortly afterwards, the Internal Medicine senior resident who was in charge of junior residents during the rotation, told me that I was no longer allowed into the 7th floor ICU. He said it was because the nurses were uncomfortable with my presence there. He told this to me in front of all of the other residents who were on the rotation.

I brought this up with Drs. Donald Phykitt and Michael Gillan. The residency was transitioning from having Dr. Donald Phykitt as the Program Director to Dr. Michael Gillan, and so both were involved in the conversation. When I told them what had occurred, they apparently had already been informed by Human Resources of the hitting incident and my being barred from the 7th floor ICU. Dr. Donald Phykitt repeatedly denied that I had been hit by a nurse and kept referring to the nurse's behavior as, "a tap." I told Drs. Donald Phykitt and Michael Gillan that being banned from entry into the 7th floor ICU was negatively affecting my education by decreasing the amount of clinical experience that I would have. They were not concerned and did not intervene on my behalf. Throughout the conversation, Dr. Donald Phykitt repeatedly diminished the severity of the behavior of the nurse and treated me as if I were overreacting.

I reported the nurses behavior to Human Resources. Human resources conducted an investigation. I requested a report of the results of the investigation from Human Resources; however, I was denied that request.

PGY-3

OMT (Osteopathic Manipulation Treatment) Track, October 2021

OMT clinics had been canceled early in the Covid-19 pandemic. When they resumed, there was discussion about whether we would require the patients to be vaccinated, what PPE would be available, and how frequently we see patients in OMT clinics. When OMT clinic resumed, the residents were asked whether we were willing to see patients in OMT clinic again.

It was during this time of adjustment (early October 2021) that I received an email from the program director Dr. Michael Gillan stating that I was being pulled off of the OMT track because I purportedly did not want to do OMT visits due to the risk of contracting Covid-19. I had not been told that there was a minimum frequency of OMT clinics required to partake in the OMT track, nor was I told that seeing too few OMT patients would be grounds for dismissal from the

OMT track. Afterwards, I was supposed to discuss my OMT clinic schedule and the osteopathic track with my advisor Dr. Mark Corey and with Dr. Donald Phykitt, the Director of Osteopathic Education. The conversation was never scheduled, no one approached me about it, and it never took place. I later discovered that I was already scheduled for OMT clinic anyway. When OMT clinics resumed, I agreed to see OMT patients and selected the frequency that was used by other residents on the OMT track. I graduated with Distinction of Advanced Osteopathic Training.

PGY-3

OMT Didactics / Credit for OMT Competencies, October/November 2021

Residents who were DO's and were on the OMT track were required to attend OMT didactics (lectures and skills sessions), present OMT journal articles, and teach an OMT skills session. For the first two years of residency, I kept track of the OMT didactics that I attended and provided documentation of this to administration. The documentation was lost. Dr. Donald Phykitt told me that all PGY-3 DO residents would be required to fulfill the lectures and skills sessions requirements for the OMT track during our PGY-3 year. We were provided with two sheets of paper, one that listed Organ Systems and another that listed Regions (of the Body). We were required to perform OMT for each of the Regions and each of the Organ Systems in order to graduate with credit for completion of the OMT track.

Didactics typically covered an Organ System, a Region of the Body, or specific techniques. All sessions included some lecture, and some sessions included a hands-on portion also known as skills sessions. I asked Dr. Donald Phykitt if I could provide documentation of the OMT didactics sessions that I had attended during the first two years of residency so that those which included skills sessions could be counted towards graduation requirements for OMT Competencies. He said yes and said that if I could provide him with a list of the sessions I attended, he would compare that with his documentation to see which of those didactics included a skills session; I could then be given credit for the Competencies that I had already demonstrated in a skills session from my first two years of residency. In October 2021, I asked Shelli Silkman, the administrative assistant for the Family Medicine Residency, to provide me with my official attendance record for OMT didactics, and she did so.

In November 2021, I provided the official OMT didactics attendance record to Dr. Phykitt. He took the list from me and set it aside on his desk and said he would not look at the list of OMT didactics I attended and compare with his list of topics covered for prior didactics. He said I would cover everything necessary during PGY-3 year.

Dr. Michael Gergel was a PGY-3 with a DO degree. He was also on the OMT track. All of the PGY-3 residents on the osteopathic track were placed in the same position where we had to receive credit for OMT training during the third year because the residency did not maintain records or lost the records from prior years. On Tuesday, March 8, 2022, Dr. Donald Phykitt gave credit to Dr. Michael Gergel for pelvic and cervical OMT techniques and backdated them

without seeing any documentation or supporting evidence. The dates of the skills sessions were March 1, 2022 (during our PGY-3 year) and June 2, 2021 (during our PGY-2 year).

In early March 2022, Dr. Donald Phykitt required me to complete a second osteopathic journal article to graduate, but did not require any other residents to present more than one osteopathic journal article in order to graduate. On March 10, 2022, I mentioned again to Dr. Donald Phykitt that I was on the schedule to present for OMT Journal Club and that I would like to be removed from the calendar if I did not have to do it. He finally asked Shelli Silkman to check the calendar to see who had not fulfilled graduation requirements yet, and she reported that there was no record of Dr. Michael Gergel having presented either an OMT journal article or an OMT Scholarly Activity, both of which were required for graduation. I requested again to have my presentation canceled and removed from the schedule and for it to be replaced with Dr. Michael Gergel's presentation. My scheduled presentation was canceled, and Dr. Michael Gergel's presentation was scheduled for a later date.

PGY-3

Residents Taking Faculty Clinics

In April 2022, Dr. Molly Witham told me she had been taking faculty clinics to get her outpatient clinic numbers needed for graduation. On May 10, 2022 she told me that she could take either Dr. Michael Gillan's or Dr. Corina Marshall's clinic anytime to get her numbers needed to graduate. I later learned that Dr. Michael Gergel and likely Dr. Patricia Catala had also been given the opportunity to take faculty clinics in order to obtain the outpatient encounters needed to graduate. This was never offered to me.

PGY-1/2/3

Ethnic background, July 2019 - June 2022

Prior to donning masks at work due to the Covid-19 pandemic, when crossing paths with Dr. Attia he would say to me, "You look so Italian!" I have not heard a comment like this made to anybody else in the residency either by Dr. Attia or anyone else. I had no idea how to respond to that.

Dr. Ben DiNovo was a resident of Italian descent. He would routinely make fun of his Italian ethnicity in spite of the fact that we were clearly taught in orientation that we are not to make fun of any ethnic background including our own in the workplace.

Dr. Molly Witham many times when speaking about a patient or another person of Italian descent with whom she had interacted, would repeat the conversation with a fake Italian accent.

In addition, Dr. Donald Phykitt has confused me with Dr. Maria Caperelli-Gergel on multiple occasions, both on Microsoft Teams meetings and in person.

PGY-3

Immune Deficiency, Violation of Privacy, October 2021

During my PGY-1 or PGY-2 year, I was in a meeting with Drs. Danielle Terry and Mark Corey. During the conversation I mentioned to them in confidence that I have an immune deficiency. In October 2021, during a conversation with Dr. Donald Phykitt, he stated to me that I wear two layers of face mask because of Covid-19 concerns. This is not true. I wear a cotton mask underneath the surgical mask because I get contact dermatitis from prolonged wearing of surgical masks. A week or so later, during another conversation with Dr. Donald Phykitt, he stated that I have an, "extra concern," about Covid-19 due to a medical problem. This signaled to me that my privacy and confidentiality were violated.

PGY-3

Orthopedics Practical Exam, March 25, 2022

During our PGY-1 and PGY-3 years, we are required to perform an orthopedic practical exam for specific joints. Dr. Hamza Virk mentioned to me that he had asked Dr. Donald Phykitt to cut down the number of joints to be examined during his orthopedics practical exam because Dr. Donald Phykitt had already observed him doing some of the joint exams in clinic. Dr. Hamza Virk told me that Dr. Donald Phykitt did indeed cut down the contents of his orthopedics practical exam. After learning this, I asked Dr. Donald Phykitt to cut down on my orthopedic practical contents because he has seen me do some of the joint exams before in clinic. He declined to do this for me. Dr. Hamza Virk is a male resident in his 20's.

Buchanan Ingersoll & Rooney PC

Anthony (T.J.) Andrisano
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September 23, 2022

Via EEOC Respondent Portal
& Electronic Mail

Casey Callahan
U.S. Equal Employment Opportunity Commission
Philadelphia District Office
801 Market Street, Suite 1000
Philadelphia, PA 19107-3126
Casey.callahan@eeoc.gov

Re: Claudia R. DiBlasi v. Guthrie Health Care System
EEOC Charge No. No. 17F-2022-61071

Dear Investigator Callahan:

This Statement of Position responds to the Complaint filed by Claudia DiBlasi (hereinafter, “DiBlasi” or “Complainant”) against Robert Packer Hospital (incorrectly identified as “Guthrie Health Care System”) (hereinafter, “Respondent”). Complainant claims Respondent discriminated against her on the basis of her alleged disability (Depression and Attention Deficit Disorder (“ADD”)) as well as her gender and age. She also claims that Respondent retaliated against her for making an accommodation request. A review of Respondent’s position, as outlined herein, along with the exhibits attached hereto, establishes that Complainant’s allegations are not only factually false, but also legally insufficient and must be dismissed as a matter of law.

Please note that Respondent is providing this information, which is confidential, with the understanding that the Equal Employment Opportunity Commission (“EEOC”) will maintain the same in confidence, will use it exclusively in its investigation of the above charge, and will not disclose it to anyone outside the EEOC without Respondent’s express prior written consent in advance of each such disclosure. This disclosure of information to the EEOC is for purposes of its investigatory proceedings and is not and should not be considered a waiver of the attorney-client privilege or the attorney work-product privilege, which Respondent maintains herein. Respondent respectfully reserves the right to amend or supplement this Statement of Position in the future, including the right to add additional information and assert additional defenses.

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Respondent responds to the EEOC's specific request for information as follows:

- 1. Produce Charging Party's complete personnel file, including but not limited to all job applications (including internal job applications), resumes, employment references, interview offers, preemployment-interview notes, offers of employment, work schedules, leave documents, documents concerning the establishment of or any adjustments to Charging Party's regular rate of pay, training records, complaints of discrimination or harassment or other workplace mistreatment filed by or against Charging Party, performance evaluations, disciplinary notices, commendation notices, letters of resignation, termination notices, and exit-interview notes.**

Respondent respectfully objects to the request on the grounds that it is overly broad, unduly burdensome, and unlikely to lead to the discovery of evidence which is admissible at trial and/or are not proportionate to the needs of the case. Additionally, Complainant was a resident pursuant to a Residency Agreement. Subject to and without waiver of the forgoing objections, *see* Respondent's Statement of Position and the documents attached thereto.

- 2. Provide all manuals, policies, procedures, handbooks, guidelines, instructions, notices, directives, training materials, and other documents that were provided to employees, including managerial and supervisory employees, in effect at the time Charging Party applied for employment with and/or was employed by Respondent.**

Respondent respectfully objects to the request on the grounds that it is overly broad, unduly burdensome, and unlikely to lead to the discovery of evidence which is admissible at trial and/or are not proportionate to the needs of the case. Subject to and without waiver of the forgoing objections, please refer to the relevant policies attached hereto as **Exhibit A**, and the Residency Agreement attached hereto as **Exhibit B**.

BACKGROUND FACTS

a. Respondent Robert Packer Hospital

Robert Packer Hospital is a 288 bed tertiary care teaching hospital that serves patients in the northern tier of Pennsylvania and southern tier of New York.

Respondent is committed to providing a workplace that is free from unlawful discrimination. As part of this commitment, Respondent has developed and trained all of its employees and residents on its Equal Employment and Employment Law Policy, which states in pertinent part:

[Respondent] supports the principles of equal employment opportunity and will not discriminate with respect to race, color, religion, gender, gender identity/expression, national origin, age, creed, sexual orientation, the presence of a disability, marital, veteran's status, or any other basis prohibited by local, state or

September 23, 2022

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federal laws in any aspect of its employment or pre-employment practices.

See Equal Employment and Employment Law Policy, attached hereto as **Exhibit A**.

There are over ten different programs for students pursuing residencies or fellowships, including an Anesthesiology Residency Program, Cardiovascular Fellowship Program, Emergency Medicine Residency Program, Family Medicine Program, and Internal Medicine Residency Program. Each residency program includes distinct medical training, timeframes, and requirements specific to that program. Relevant to Complainant's Complaint, the Family Medicine Residency Program (the "family medicine program") is coordinated by Respondent in Sayre, Pennsylvania. The family medicine program provides residents with ample training opportunities and, in addition to continuity primary care, offers unique clinics within Respondent's office. These include surgical procedures, sports medicine evaluations, concussion assessments, gynecologic procedures, osteopathic manipulation, cognitive behavioral therapy, integrated behavioral medicine, and neuropsychological assessment.

Respondent maintains written Residency Agreements¹ with of its all residents. The residents' position descriptions for their particular residency program are incorporated as part of their Residency Agreements.

b. Complainant Claudia R. DiBlasi

In or around March of 2019, Complainant applied to Respondent's family medicine program. She was accepted and began working as a family medicine resident in or around June of 2019. The Residency Agreement ("Agreement") between Respondent and Complainant detailing Complainant's participation in the family medicine program is attached hereto as **Exhibit B**.

Pursuant to the Agreement, Complainant is responsible for fulfilling the program and institutional educational and professional responsibilities of the family medicine program. *See Exhibit B* at page 9. These responsibilities are outlined in Complainant's Position Description, and include attending all required teaching conferences and providing comprehensive and coordinated care to patients. *See id* at pages 8 – 11. Complainant's duties also include other patient care or educational activities assigned to the resident by the program director, faculty or supervising attending if patient well-being or the resident's education is fostered. *See id* at page 11.

¹ The Residency Agreements refer to resident physicians as House Officers. For consistency, Respondent will continue to use the term "Resident" rather than "House Officer."

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ARGUMENT

a. Complainant's only outstanding requirement to graduate from the Family Medicine Residency Program is seeing a set number of patients.

Complainant completed nearly all requirements of the Family Medicine Residency Program. Her only outstanding requirement is clinical – she must see a set number of patients, which Respondent estimates she can accomplish in about 2-4 weeks. Once Complainant sees her final patient, she will have successfully completed the entire family medicine program. In other words, Complainant has no outstanding lectures, presentations, or journal articles, and will soon graduate from her residency with Respondent.

Respondent is unaware of any formal requests by Complainant to be transferred into a different residency program. Either way, Complainant applied for and was accepted into Respondent's family medicine program *only*. Complainant's Agreement with Respondent pertains *only* to the family medicine program, and Complainant is a few weeks shy of completing all requirements of the family medicine program. The Agreement explicitly states that residents may not be transferred after beginning their second year absent extraordinary circumstances. *See Exhibit B* at page 23. Respondent does not permit any resident to transfer into a different residency program at *any time* absent extraordinary circumstances. In this regard, Respondent treated Complainant the same as every other resident.

Likewise, Respondent is unaware of any requests by Complainant to be excused from lectures. To the contrary, Respondent's only record regarding Complainant's alleged ADD diagnosis is an email confirming that Complainant did not wish to request any accommodations with respect to her ADD. *See April 15, 2020 Email*, attached hereto as **Exhibit C**. To reiterate, Complainant has attended all required lectures for the family medicine program. Similarly, she has no outstanding presentations or journal articles, and will graduate after she sees a set number of additional patients.

b. Respondent assigned Complainant the same program and institutional educational and professional responsibilities as all of its Family Medicine residents.

Respondent's residency programs include a detailed curriculum and a dynamic, hands-on learning environment. As explained above, Complainant's duties under the Agreement could include patient care or educational activities assigned to the resident by the program director, faculty or supervising attending. Respondent assigned Complainant the same responsibilities as other residents in the family medicine program, in the hope that all residents will graduate with the requisite knowledge and skill to provide exceptional patient care in their future careers. Absolutely no discrimination or differential treatment occurred during Complainant's time with Respondent. Accordingly, Respondent vehemently denies Complainant's contrary allegations.

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Page 5

c. Respondent accommodated Complainant's requests for Anesthesiology rotations.

Respondent has no record of any request for a transfer to the Anesthesiology Residency Program. However, on January 15, 2021, Complainant had her Program Adviser request that Program Director Dr. Michael Gillian cancel Complainant's clinics and excuse her from didactics so that she could participate in an Anesthesiology rotation. Respondent accommodated this request on very short notice to maximize Complainant's educational experience. *See* January 22, 2021 Email, attached hereto as **Exhibit D**. To further assist Complainant in pursuing a career in Anesthesiology, Respondent's providers have written letters recommending her as a candidate for future Anesthesiology Residencies.

Accordingly, Respondent did not take any action against Complainant as a result of her purported disability, her sex or her age. To the contrary, Complainant is all set to graduate from the family medicine program.

CONCLUSION

For all of the reasons set forth above, Complainant's Complaint lacks probable cause and, therefore, must be dismissed in its entirety.

Very truly yours,



Anthony (T.J.) Andrisano

Attachments



- Expected delivery date specified for domestic use.
- Most domestic shipments include up to \$50 of insurance (restrictions apply).*
- USPS Tracking® included for domestic and many international destinations.
- Limited international insurance.**

■ When used internationally, a customs declaration form is required.

Insurance does not cover certain items. For details regarding claims exclusions see the Domestic Mail Manual at <http://ipm.usps.com>.
* See International Mail Manual at <http://ime.usps.com> for availability and limitations of coverage.

FLAT RATE ENVELOPE

ONE RATE ■ ANY WEIGHT

TRACKED ■ INSURED

To schedule free Package Pickup,
scan the QR code.

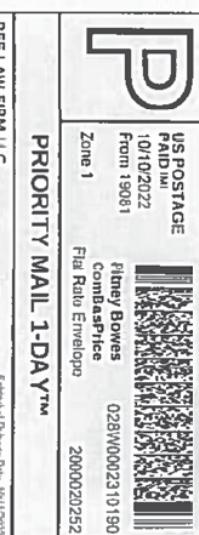


EP14F May 2020

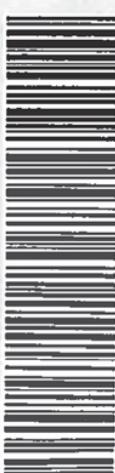
OD: 12 1/2 x 9 1/2



US EEOC
PHILADELPHIA REGIONAL OFFICE
801 MARKET ST, STE 1000
PHILADELPHIA PA 19107-3127



USPS TRACKING #



9405 5092 0212 1626 3824 81

EEOC0094

RFE LAW

105 Rutgers Avenue #249
Swarthmore, Pennsylvania 19081
Phone: 1.888.973.3529
Fax: 1.888.251.2657
<http://www.rfelawfirm.com>

October 10, 2022

VIA USPS PRIORITY MAIL

No. 9405 5092 0212 1626 3824 81

United States Equal Employment Opportunity Commission
Philadelphia District Office
801 Market Street, Suite 1000
Philadelphia, Pennsylvania 19107-3126

**RE: My Client: Claudia R. DiBlasi, DO
Employer: Guthrie Robert Packer Hospital
EEOC Charge No.: 17F-2022-61071**

REQUESTING EXTENSION TO RESPOND TO EMPLOYER'S POSITION STATEMENT

Dear Sir/Madam:

I have been consulted by Claudia R. DiBlasi, DO ("Dr. DiBlasi") concerning the investigation of the above-referenced charge. Dr. DiBlasi reports that she has received an electronic notification from the EEOC that the Employer has provided a Position Statement. The notice also requests Dr. DiBlasi to provide a response to the Position Statement before October 17, 2022. To date, however, Dr. DiBlasi has not actually been provided with a copy of the Employer's Position Statement. When she attempted to access her case via the EEOC Public Portal, nothing is available except for a notice indicating that her charge is now being investigated by the Pennsylvania Human Relations Commission ("PHRC") as set forth in the enclosed screenshot.

When Dr. DiBlasi contacted the PHRC, she was advised that the PHRC has not received anything related to this charge from the EEOC. Upon receipt of this letter, kindly provide Dr. DiBlasi with an update concerning the status of the investigation of her charge and provide her with a copy of the Position Statement directly via email to **Personal Identifier**. Dr. DiBlasi is also requesting an extension of time to respond to the Employer's position statement of twenty (20) days from the date on which she receives a copy of the same.

RFE LAW FIRM, LLC

Delaware Valley: 105 Rutgers Avenue #249 • Swarthmore, Pennsylvania 19081
Central Pennsylvania: 333 North Vesper Street • Lock Haven, Pennsylvania 17745
Philadelphia: 3510 Baring Street • Philadelphia, Pennsylvania 19104

RFE LAW

105 Rutgers Avenue #249
Swarthmore, Pennsylvania 19081
Phone: 1.888.973.3529
Fax: 1.888.251.2657
<http://www.rfelawfirm.com>

The purpose of this letter is solely to assist Dr. DiBlasi in determining the status of the investigation of her charge and to request that she should be provided with an extension of time to respond to the Position Statement after she receives a copy of the same. Please be advised that you may and should communicate directly with Dr. DiBlasi. Dr. DiBlasi has requested that the EEOC should investigate and prosecute the charge on her behalf. My firm will not have any ongoing role in the matter unless the EEOC closes its investigation and issues a Right to Sue letter.

Thank you for your attention to this matter.

Sincerely,



ROBERT ENGLER

RFE:pps
Enclosures
cc: Claudia DiBlasi, DO

RFE LAW FIRM, LLC

Delaware Valley: 105 Rutgers Avenue #249 • Swarthmore, Pennsylvania 19081
Central Pennsylvania: 333 North Vesper Street • Lock Haven, Pennsylvania 17745
Philadelphia: 3510 Baring Street • Philadelphia, Pennsylvania 19104



U.S. Equal Employment Opportunity Commission

Welcome, Claudia | Log Out

Case Message

Your charge **17F-2022-61071** is currently being investigated by **Pennsylvania Human Relations Commission** and is not available in the EEOC Public Portal. Please contact **(717) 787-4410** for any questions regarding your charge and to submit any documentation related to your charge.

[Return to Home](#) [Return to My Cases](#)



Date	Event	Name
6/1/2023 12:33	Downloaded Document. Type: Notice of Dual-Filed Charge & FileName:17F-2022-61071_NotifyOfDualFiledCharge.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Other Field Work Document & FileName:17F-2022-61071_202102482Deferral.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Letter of Representation from Charging Party Attorney & FileName:2022-04-22 LOR from CPA.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Charging Party Questionnaire (Form 283) & FileName:2022-04-22 PHRC Employment Intake Questionnaire.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NotifyOfChargeOfDiscrimination.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Request for Information (RFI) to Respondent & FileName:2022-07-26 RFI 17F-2022-61071.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Position Statement Extension Request & FileName:DiBlasi - EEOC Ltr re extension 8.3.22 4888-5466-8333 v.1.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Position Statement Extension Request & FileName:2022-8-4 R Atty Email re PS Extension Request.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Position Statement Attachments-Non-Confidential & FileName:DiBlasi - SOP Exhibits 9.23.22.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Position Statement & FileName:DiBlasi- EEOC Position Statement 9.23.22.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Correspondence with Respondent Attorney & FileName:2022-9-23 R Atty Email re PS.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Correspondence with Respondent Attorney & FileName:2022-9-30 R Atty email re Portal Issue.pdf	BRIDGET LANGE

6/1/2023 12:33	Downloaded Document. Type: Correspondence with Third Parties & FileName:Scanned from a Xerox Multifunction Printer.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Rebuttal to Position Statement & FileName:Response Due December 5 & 2022.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Correspondence with Third Parties & FileName:2022-10-10 17F-2022-61071 Letter from 3rd Party.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Correspondence with Charging Party & FileName:2022-12 17F-2022-61071 CP Correspondence.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Correspondence with Respondent Attorney & FileName:2023-2-1 17F-2022-61071 R Correspondence.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Closure Notice/NRTS & FileName:2023-3-3 17F-2022-61071 Closure Notice-NRTS.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Correspondence with Charging Party & FileName:2023-04-13 Mailed NRTS to CP for 17F-2022-61071.pdf	BRIDGET LANGE
6/1/2023 12:33	Downloaded Document. Type: Correspondence with Respondent Contact & FileName:2023-04-13 Mailed NRTS to R for 17F-2022-61071.pdf	BRIDGET LANGE
5/4/2023 14:13	FOIA Request 530-2023-008118 denied	Foia User
5/4/2023 13:29	FOIA Request 530-2023-008654 received.	Foia User
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4/21/2023 10:37	FOIA Request 530-2023-008118 received.	Foia User
4/13/2023 10:25	Contact with Respondent record added	DIXIE ANDERSON
4/13/2023 10:25	Contact with Charging Party record added	DIXIE ANDERSON
4/13/2023 10:25	Uploaded Document. Type: Correspondence with Respondent Contact & FileName:2023-04-13 Mailed NRTS to R for 17F-2022-61071.pdf	DIXIE ANDERSON
4/13/2023 10:24	Uploaded Document. Type: Correspondence with Charging Party & FileName:2023-04-13 Mailed NRTS to CP for 17F-2022-61071.pdf	DIXIE ANDERSON

4/12/2023 10:53	Generated Document. Type: Mailing RTS Cover Letter - not downloaded & FileName:17F-2022-61071_Mailing RTS Cover Letter - not downloaded.docx	DIXIE ANDERSON
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3/6/2023 13:08	Contact with Respondent Attorney record added	BRITTANY DOBROWOLSKI
3/6/2023 13:08	Contact with Charging Party record added	BRITTANY DOBROWOLSKI
3/6/2023 13:06	Downloaded Document. Type: Closure Notice/NRTS & FileName:2023-3-3 17F-2022-61071 Closure Notice-NRTS.pdf	BRITTANY DOBROWOLSKI
3/3/2023 15:06	Emailed Anthony Andrisano at anthony.andrisano@bipc.com that a new document is available to download.	Arcapp User
3/3/2023 15:06	Emailed Linda Berry at linda.berry@guthrie.org that a new document is available to download.	Arcapp User
3/3/2023 15:06	Emailed Alyssa Kuhl at alyssa.kuhl@bipc.com that a new document is available to download.	Arcapp User
3/3/2023 15:06	Emailed Krista Kiger at krista.kiger@bipc.com that a new document is available to download.	Arcapp User
3/3/2023 15:06	Closure Notice/NRTS (2023-3-3 17F-2022-61071 Closure Notice-NRTS.pdf) released	BRITTANY DOBROWOLSKI
3/3/2023 15:06	Case status changed from Investigation to Charge Closed.	BRITTANY DOBROWOLSKI
3/3/2023 15:06	Case moved to CLOSED stage.	BRITTANY DOBROWOLSKI
3/3/2023 15:06	Charge has been closed with reason No Cause Finding.	BRITTANY DOBROWOLSKI
3/3/2023 15:06	Closure Supervisor review approved.	BRITTANY DOBROWOLSKI
3/3/2023 15:05	Uploaded Document. Type: Closure Notice/NRTS & FileName:2023-3-3 17F-2022-61071 Closure Notice-NRTS.pdf	BRITTANY DOBROWOLSKI
3/3/2023 15:03	Pre-Determination Interview note updated. Type:Pre-Determination Interview.	BRITTANY DOBROWOLSKI
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3/3/2023 14:53	Uploaded Document. Type: Correspondence with Respondent Attorney & FileName:2023-2-1 17F-2022-61071 R Correspondence.pdf	BRITTANY DOBROWOLSKI
3/3/2023 14:49	Deleted Charging Party Legal Representative.	BRITTANY DOBROWOLSKI
3/3/2023 14:48	Assigned to BRITTANY DOBROWOLSKI for Supervisor Closure review	BRITTANY DOBROWOLSKI

3/3/2023 14:48	Supporting Details for recommended charge closure added: (b) (5) [REDACTED]	BRITTANY DOBROWOLSKI
3/3/2023 14:48	Charge recommended for No Cause Finding closure.	BRITTANY DOBROWOLSKI
3/3/2023 14:48	ADEA Age Terms/Conditions closed with No Cause Finding	BRITTANY DOBROWOLSKI
3/3/2023 14:48	ADA Psychiatric/Mental Health Conditions- Depression Other Issue Not Listed Above closed with No Cause Finding	BRITTANY DOBROWOLSKI
3/3/2023 14:48	ADEA Age Other Issue Not Listed Above closed with No Cause Finding	BRITTANY DOBROWOLSKI
3/3/2023 14:48	ADA Other Basis Not Listed Other Issue Not Listed Above closed with No Cause Finding	BRITTANY DOBROWOLSKI
3/3/2023 14:48	Title VII Sex-Female Other Issue Not Listed Above closed with No Cause Finding	BRITTANY DOBROWOLSKI
3/3/2023 14:48	ADA Psychiatric/Mental Health Conditions- Depression Reasonable Accommodation closed with No Cause Finding	BRITTANY DOBROWOLSKI
3/3/2023 14:46	Closure note added. Type:Closure and Non-Disclosable:No.	BRITTANY DOBROWOLSKI
3/3/2023 14:43	Pre-Determination Interview note added. Type:Pre-Determination Interview and Non-Disclosable:No.	BRITTANY DOBROWOLSKI

3/3/2023 14:39	Uploaded Document. Type: Correspondence with Charging Party & FileName:2022-12 17F-2022-61071 CP Correspondence.pdf	BRITTANY DOBROWOLSKI
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3/3/2023 14:35	Uploaded Document. Type: Correspondence with Third Parties & FileName:2022-10-10 17F-2022-61071 Letter from 3rd Party.pdf	BRITTANY DOBROWOLSKI
3/3/2023 11:03	Downloaded Document. Type: Rebuttal to Position Statement & FileName:Response Due December 5 & 2022.pdf	BRITTANY DOBROWOLSKI
3/3/2023 10:54	Uploaded Document. Type: Rebuttal to Position Statement & FileName:Response Due December 5 & 2022.pdf	BRITTANY DOBROWOLSKI
3/3/2023 8:25	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	BRITTANY DOBROWOLSKI
1/30/2023 10:30	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	BRITTANY DOBROWOLSKI
12/1/2022 19:19	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NoteOfChargeOfDiscrimination.pdf	BRITTANY DOBROWOLSKI
10/24/2022 10:08	Contact with Charging Party record added	BRITTANY DOBROWOLSKI
10/24/2022 9:44	Downloaded Document. Type: Position Statement Attachments-Non-Confidential & FileName:DiBlasi - SOP Exhibits 9.23.22.pdf	BRITTANY DOBROWOLSKI
10/24/2022 9:44	Downloaded Document. Type: Position Statement & FileName:DiBlasi- EEOC Position Statement 9.23.22.pdf	BRITTANY DOBROWOLSKI
10/24/2022 9:26	Uploaded Document. Type: Correspondence with Third Parties & FileName:Scanned from a Xerox Multifunction Printer.pdf	BRITTANY DOBROWOLSKI
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10/11/2022 13:17	Downloaded Document. Type: Charging Party Questionnaire (Form 283) & FileName:2022-04-22 PHRC Employment Intake Questionnaire.pdf	BRITTANY DOBROWOLSKI
10/11/2022 12:39	Downloaded Document. Type: Position Statement Attachments-Non-Confidential & FileName:DiBlasi - SOP Exhibits 9.23.22.pdf	BRITTANY DOBROWOLSKI
10/11/2022 12:07	Downloaded Document. Type: Position Statement & FileName:DiBlasi- EEOC Position Statement 9.23.22.pdf	BRITTANY DOBROWOLSKI

10/11/2022 12:07	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	BRITTANY DOBROWOLSKI
10/11/2022 12:06	Charge assignee BRITTANY DOBROWOLSKI (NA) viewed charge details.	BRITTANY DOBROWOLSKI
10/6/2022 12:42	BRITTANY DOBROWOLSKI designated as the primary assignee	DAVID HOLOHAN
10/6/2022 12:42	Casey Callahan removed as the primary assignee	DAVID HOLOHAN
9/30/2022 8:07	Uploaded Document. Type: Correspondence with Respondent Attorney & FileName:2022-9-30 R Atty email re Portal Issue.pdf	DAVID HOLOHAN
9/30/2022 7:59	Downloaded Document. Type: Correspondence with Respondent Attorney & FileName:2022-9-23 R Atty Email re PS.pdf	DAVID HOLOHAN
9/27/2022 7:35	Casey Callahan designated as the primary assignee	DAVID HOLOHAN
9/27/2022 7:35	Uploaded Document. Type: Correspondence with Respondent Attorney & FileName:2022-9-23 R Atty Email re PS.pdf	DAVID HOLOHAN
9/27/2022 7:34	Emailed Claudia R. DiBlasi at diblasi.claudia@gmail.com that a new document is available to download.	Arcapp User
9/27/2022 7:34	Position Statement (DiBlasi- EEOC Position Statement 9.23.22.pdf) released	DAVID HOLOHAN
9/23/2022 15:36	Uploaded Document. Type: Position Statement Attachments-Non-Confidential & FileName:DiBlasi - SOP Exhibits 9.23.22.pdf	Respondentportal User
9/23/2022 15:36	Emailed Claudia R. DiBlasi at [REDACTED] Personal Identifier [REDACTED] that a new document is available to download.	Arcapp User
9/23/2022 15:36	Position Statement received from Respondent on 09/23/2022 15:36:17	Respondentportal User
9/23/2022 15:36	Uploaded Document. Type: Position Statement & FileName:DiBlasi- EEOC Position Statement 9.23.22.pdf	Respondentportal User

9/23/2022 15:35	Please provide a statement of your position on the issues covered in the charge & with any supporting documentation by September 23 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. Also & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
9/23/2022 15:35	Respondent logged in	Respondentportal User
8/31/2022 15:12	Unassigned ADR Representative Casey Callahan (Supervisory Investigator)	Arcapp User
8/23/2022 8:32	Charge assignee Casey Callahan (Supervisory Investigator) viewed charge details.	CASEY CALLAHAN
8/10/2022 9:42	Downloaded Document. Type: Request for Information (RFI) to Respondent & FileName:2022-07-26 RFI 17F-2022-61071.pdf	DAVID HOLOHAN
8/4/2022 6:24	Uploaded Document. Type: Position Statement Extension Request & FileName:2022-8-4 R Atty Email re PS Extension Request.pdf	DAVID HOLOHAN
8/4/2022 6:22	Position Statement data has been updated	DAVID HOLOHAN
8/4/2022 6:22	Position Statement Due Date 09/23/2022 04:00:00 updated.	DAVID HOLOHAN
8/3/2022 14:02	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NotifyOfChargeOfDiscrimination.pdf	Respondentportal User
8/3/2022 14:02	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	Respondentportal User

8/3/2022 14:02	Please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. Also & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
8/3/2022 14:02	Respondent logged in	Respondentportal User
8/3/2022 12:34	Uploaded Document. Type: Position Statement Extension Request & FileName:DiBlasi - EEOC Ltr re extension 8.3.22 4888-5466-8333 v.1.pdf	Respondentportal User
8/3/2022 12:26	Please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. Also & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
8/3/2022 12:26	Respondent logged in	Respondentportal User
8/3/2022 12:26	Respondent logged in	Respondentportal User
8/3/2022 12:16	Downloaded Document. Type: Request for Information (RFI) to Respondent & FileName:2022-07-26 RFI 17F-2022-61071.pdf	Respondentportal User

8/3/2022 12:15	Please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. Also & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
8/3/2022 12:15	Respondent logged in	Respondentportal User
8/3/2022 11:53	Casey Callahan designated as the primary assignee	SHIRLEY WEARNE
8/3/2022 11:52	Case status changed from Charge is no longer eligible for ADR to Investigation.	SHIRLEY WEARNE
8/3/2022 11:52	Unassigned ADR Representative Shirley Wearne (NA)	SHIRLEY WEARNE
8/3/2022 11:52	Emailed Anthony Andrisano at anthony.andrisano@bipc.com that a new activity is posted.	SHIRLEY WEARNE
8/3/2022 11:52	Emailed Linda Berry at linda.berry@guthrie.org that a new activity is posted.	SHIRLEY WEARNE
8/3/2022 11:52	Emailed Alyssa Kuhl at alyssa.kuhl@bipc.com that a new activity is posted.	SHIRLEY WEARNE
8/3/2022 11:52	Emailed Krista Kiger at krista.kiger@bipc.com that a new activity is posted.	SHIRLEY WEARNE
8/3/2022 11:52	(b) (7)(A) [REDACTED]	SHIRLEY WEARNE
8/3/2022 10:48	(b) (7)(A) [REDACTED]	Respondentportal User
8/3/2022 10:47	Added Respondent Legal Representative.	Respondentportal User
8/3/2022 10:46	Added Respondent Legal Representative.	Respondentportal User
8/3/2022 10:45	Added Respondent Legal Representative.	Respondentportal User

8/3/2022 10:42	Please select a response to the Mediation Offer on this page by August 10 & 2022. If you choose ?No? & please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. If you choose ?No? & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
8/3/2022 10:42	Respondent logged in	Respondentportal User
7/29/2022 16:16	PP user confirms that the Preservation of Evidence has been reviewed	dibiasi.claudia@gmail.com
7/26/2022 10:32	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NotifyOfChargeOfDiscrimination.pdf	Respondentportal User
7/26/2022 10:31	Downloaded Document. Type: Request for Information (RFI) to Respondent & FileName:2022-07-26 RFI 17F-2022-61071.pdf	Respondentportal User
7/26/2022 10:31	Downloaded Document. Type: Request for Information (RFI) to Respondent & FileName:2022-07-26 RFI 17F-2022-61071.pdf	Respondentportal User
7/26/2022 10:31	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NotifyOfChargeOfDiscrimination.pdf	Respondentportal User
7/26/2022 10:31	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NotifyOfChargeOfDiscrimination.pdf	Respondentportal User
7/26/2022 10:30	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NotifyOfChargeOfDiscrimination.pdf	Respondentportal User

7/26/2022 10:02	Please select a response to the Mediation Offer on this page by August 10 & 2022. If you choose ?No? & please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. If you choose ?No? & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
7/26/2022 10:02	Respondent logged in	Respondentportal User
7/26/2022 8:57	Downloaded Document. Type: Request for Information (RFI) to Respondent & FileName:2022-07-26 RFI 17F-2022-61071.pdf	Respondentportal User
7/26/2022 8:57	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NoteOfChargeOfDiscrimination.pdf	Respondentportal User
7/26/2022 8:57	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	Respondentportal User
7/26/2022 8:56	Please select a response to the Mediation Offer on this page by August 10 & 2022. If you choose ?No? & please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. If you choose ?No? & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
7/26/2022 8:56	Respondent logged in	Respondentportal User

7/26/2022 8:53	Please select a response to the Mediation Offer on this page by August 10 & 2022. If you choose ?No? & please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. If you choose ?No? & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
7/26/2022 8:53	Respondent logged in	Respondentportal User
7/26/2022 8:51	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	Respondentportal User
7/26/2022 8:47	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	Respondentportal User
7/26/2022 8:47	Please select a response to the Mediation Offer on this page by August 10 & 2022. If you choose ?No? & please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. If you choose ?No? & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
7/26/2022 8:47	Respondent logged in	Respondentportal User
7/26/2022 8:42	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	Respondentportal User

7/26/2022 8:42	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NotifyOfChargeOfDiscrimination.pdf	Respondentportal User
7/26/2022 8:41	Downloaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NotifyOfChargeOfDiscrimination.pdf	Respondentportal User
7/26/2022 8:40	Please select a response to the Mediation Offer on this page by August 10 & 2022. If you choose ?No? & please provide a statement of your position on the issues covered in the charge & with any supporting documentation by August 25 & 2022. For guidance on how to best prepare your Position Statement & please review Effective Position Statements & as EEOC has revised its procedures related to the content and release of position statements & effective January 1 & 2016. If you choose ?No? & please review the Request for Information located under the ?Documents? section & and provide a written response to it with any supporting documentation by the Response Deadline Date it stipulates.	Respondentportal User
7/26/2022 8:40	Respondent logged in	Respondentportal User
7/26/2022 8:40	Respondent password changed	Respondentportal User
7/26/2022 8:37	Shirley Wearne designated as the primary assignee	ROBERT MCMEEKIN
7/26/2022 8:37	Emailed Linda Berry at linda.berry@guthrie.org that a new activity is posted.	ROBERT MCMEEKIN
7/26/2022 8:37	Case status changed from Charge filed to Charge is eligible for ADR.	ROBERT MCMEEKIN
7/26/2022 8:37	Emailed Linda Berry at linda.berry@guthrie.org that a new document is available to download.	Arcapp User
7/26/2022 8:37	Request for Information (RFI) to Respondent (2022-07-26 RFI 17F-2022-61071.pdf) released	ROBERT MCMEEKIN
7/26/2022 8:36	Uploaded Document. Type: Request for Information (RFI) to Respondent & FileName:2022-07-26 RFI 17F-2022-61071.pdf	ROBERT MCMEEKIN
7/26/2022 8:35	Generated Document. Type: Philly Local Template RFI & FileName:17F-2022-61071_Philly Local Template RFI.docx	ROBERT MCMEEKIN
7/26/2022 8:35	Generated Document. Type: Philly Local Template RFI & FileName:17F-2022-61071_Philly Local Template RFI.docx	ROBERT MCMEEKIN

7/26/2022 8:35	Emailed Linda Berry at linda.berry@guthrie.org that charge has been perfected	ROBERT MCMEEKIN
7/26/2022 8:35	Uploaded Document. Type: Notice of Charge & FileName:17F-2022-61071_NoteOfChargeOfDiscrimination.pdf	ROBERT MCMEEKIN
7/26/2022 8:35	Generated Document. Type: Notice of Charge & FileName:17F-2022-61071_NoteOfChargeOfDiscrimination.pdf	ROBERT MCMEEKIN
7/26/2022 8:35	PCHP Supervisor review approved.	ROBERT MCMEEKIN
7/26/2022 8:35	Assigned to Robert McMeekin for Supervisor PCHP review	ROBERT MCMEEKIN
7/26/2022 8:34	Added Processing Category Factor (b) (5)	ROBERT MCMEEKIN
7/26/2022 8:34	Added Processing Category Factor (b) (5) [REDACTED]	ROBERT MCMEEKIN
7/26/2022 8:34	Processing category justification text is revised as (b) (5) [REDACTED] [REDACTED]	ROBERT MCMEEKIN
7/26/2022 8:32	General note deleted. Type:General.	ROBERT MCMEEKIN
7/26/2022 8:32	General note added. Type:General and Non-Disclosable:No.	ROBERT MCMEEKIN
7/26/2022 8:31	Added SEP (b) (5)	ROBERT MCMEEKIN
7/26/2022 8:31	Added Processing Category Factor (b) (5) [REDACTED]	ROBERT MCMEEKIN
7/26/2022 8:31	Added TOPIC (b) (5) [REDACTED]	ROBERT MCMEEKIN
7/26/2022 8:31	Added DCP (b) (5) [REDACTED]	ROBERT MCMEEKIN
7/26/2022 8:31	PCHP assess PCHP Assessment added.	ROBERT MCMEEKIN
7/26/2022 8:31	Processing category justification text is added as (b) (5) [REDACTED] [REDACTED]	ROBERT MCMEEKIN
7/26/2022 8:31	Processing Category (b) (5) [REDACTED]	ROBERT MCMEEKIN
7/26/2022 8:30	Downloaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	ROBERT MCMEEKIN
7/26/2022 8:29	Downloaded Document. Type: Charging Party Questionnaire (Form 283) & FileName:2022-04-22 PHRC Employment Intake Questionnaire.pdf	ROBERT MCMEEKIN
7/26/2022 8:29	Downloaded Document. Type: Letter of Representation from Charging Party Attorney & FileName:2022-04-22 LOR from CPA.pdf	ROBERT MCMEEKIN
7/26/2022 8:28	General note added. Type:General and Non-Disclosable:No.	ROBERT MCMEEKIN

7/26/2022 8:26	Added Charging Party Legal Representative.	ROBERT MCMEEKIN
7/26/2022 8:19	Emailed Claudia R. DiBlasi at [REDACTED] Personal Identifier [REDACTED] that charge has been Filed	ROBERT MCMEEKIN
7/26/2022 8:19	Uploaded Document. Type: Charge of Discrimination & FileName:2022-04-22 PHRC Charge.pdf	ROBERT MCMEEKIN
7/26/2022 8:19	Case data updated: receivedFrom set to Attorney-drafted Charge.	ROBERT MCMEEKIN
7/26/2022 8:19	Case data updated: receivedBy set to Mail.	ROBERT MCMEEKIN
7/26/2022 8:19	Case data updated: initialInquiryDate set to 2022-04-22.	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent eeo1UnitName added as EEO1	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent eeo1UnitNbr added as B00434	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent eeo1HQNbr added as L31732	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent name changed to GUTHRIE HEALTHCARE SYSTEM	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent naicsCode changed to 622310	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent emlEmployerId added as 1388426	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent ein added as 240795463	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent county added as BRADFORD	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent city changed to SAYRE	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent addressLine2 added as 1 GUTHRIE SQ	ROBERT MCMEEKIN
7/26/2022 8:16	Respondent addressLine1 changed to ROBERT PACKER HOSPITAL	ROBERT MCMEEKIN
7/26/2022 8:15	Respondent phone changed to (570) 888-6666	ROBERT MCMEEKIN
7/26/2022 8:15	Respondent name changed to GUTHRIE ROBERT PACKER HOSPITAL	ROBERT MCMEEKIN
7/26/2022 8:15	Respondent naicsCode added as 622110	ROBERT MCMEEKIN
7/26/2022 8:15	Respondent institutionType added as Private Employer	ROBERT MCMEEKIN
7/26/2022 8:15	Respondent emlState added as Respondent must verify record.	ROBERT MCMEEKIN
7/26/2022 8:15	Respondent addressLine2 changed to	ROBERT MCMEEKIN
7/26/2022 8:15	Respondent addressLine1 changed to 1 Guthrie Square	ROBERT MCMEEKIN
7/26/2022 8:13	Charging Party nationalOriginCategory changed to American (U.S.) Origin	ROBERT MCMEEKIN
7/26/2022 8:13	Charging Party nationalOriginGroup changed to American/Other Origin Group	ROBERT MCMEEKIN
7/26/2022 8:13	Charging Party middleInitial added as R	ROBERT MCMEEKIN
7/26/2022 8:13	Charging Party homePhone added as (570) 888-6666	ROBERT MCMEEKIN
7/26/2022 8:13	Charging Party cellNumber changed to (484) 744-2165	ROBERT MCMEEKIN
7/26/2022 8:13	Charging Party race changed to White	ROBERT MCMEEKIN

7/26/2022 8:10	Uploaded Document. Type: Charging Party Questionnaire (Form 283) & FileName:2022-04-22 PHRC Employment Intake Questionnaire.pdf	ROBERT MCMEEKIN
7/26/2022 8:10	Uploaded Document. Type: Letter of Representation from Charging Party Attorney & FileName:2022-04-22 LOR from CPA.pdf	ROBERT MCMEEKIN
7/26/2022 7:55	Downloaded Document. Type: Other Field Work Document & FileName:17F-2022-61071_202102482 Deferral.pdf	ROBERT MCMEEKIN
7/26/2022 7:53	Added Respondent Contact Information.	ROBERT MCMEEKIN
7/26/2022 7:46	Downloaded Document. Type: Other Field Work Document & FileName:17F-2022-61071_202102482 Deferral.pdf	ROBERT MCMEEKIN
7/25/2022 17:38	The EEOC response Approved added to FEPA Credit Intake submitted by Pennsylvania Human Relations Commission.	DAMON JOHNSON
7/25/2022 17:38	Case status changed from FEPA Credit to Charge filed.	DAMON JOHNSON
7/25/2022 17:37	Uploaded Document. Type: Other Field Work Document & FileName:17F-2022-61071_202102482 Deferral.pdf	DAMON JOHNSON
7/23/2022 6:00	FEPA credit request for Credit Intake submitted by Pennsylvania Human Relations Commission.	FEPA GATEWAYPA
7/8/2022 12:00	Uploaded Document. Type: Notice of Dual-Filed Charge & FileName:17F-2022-61071_NotifyOfDualFiledCharge.pdf	DAMON JOHNSON
7/8/2022 12:00	Generated Document. Type: Notice of Dual-Filing & Acknowledgement of Charge & FileName:17F-2022-61071_NotifyOfDualFiledCharge.pdf	DAMON JOHNSON
7/8/2022 12:00	Dual filing notification acknowledged by Philadelphia District Office:Defer Investigation	DAMON JOHNSON
7/8/2022 12:00	Identified Deferral Office Intent by Philadelphia District Office as Defer Investigation	DAMON JOHNSON
7/8/2022 8:00	Allegation ADEA Age Other Issue Not Listed Above added to case	FEPA GATEWAYPA
7/8/2022 8:00	Allegation ADA Other Basis Not Listed Other Issue Not Listed Above added to case	FEPA GATEWAYPA
7/8/2022 8:00	Allegation ADA Psychiatric/Mental Health Conditions- Depression Reasonable Accommodation added to case	FEPA GATEWAYPA
7/8/2022 8:00	Allegation Title VII Sex-Female Other Issue Not Listed Above added to case	FEPA GATEWAYPA

7/8/2022 8:00	Allegation ADEA Age Terms/Conditions added to case	FEPA GATEWAYPA
7/8/2022 8:00	Allegation ADA Psychiatric/Mental Health Conditions- Depression Other Issue Not Listed Above added to case	FEPA GATEWAYPA
7/8/2022 8:00	Dual filing notification sent to Philadelphia District Office	FEPA GATEWAYPA
7/8/2022 8:00	Identified Receiving Office Intent as Investigate Charge	FEPA GATEWAYPA
7/8/2022 8:00	Selected Deferral Office: Philadelphia District Office	FEPA GATEWAYPA
7/8/2022 8:00	Charge is submitted.	FEPA GATEWAYPA

Created By	Posted On	Contacted	Purpose	Notes
DIXIE ANDERSON	4/13/2023 10:25:33 EST	Respondent	Contact	Mailed NRTS to R via USPS.
DIXIE ANDERSON	4/13/2023 10:25:12 EST	Charging Party	Contact	Mailed NRTS to CP via USPS.
BRITTANY DOBROWOLSKI	3/6/2023 13:08:49 EST	Respondent Attorney	Contact	3-6-23 emailed RTS to R's rep as they cannot log onto the portal
BRITTANY DOBROWOLSKI	3/6/2023 13:08:24 EST	Charging Party	Contact	3-3-2023 PDI CP - See notes
BRITTANY DOBROWOLSKI	10/24/2022 10:08:04 EST	Charging Party	Contact	10-24-2022 emailed PS to CP and provided 21 days to provide a response